

# **Annual Report**

## **Center for Health/HIV Intervention and Prevention (CHIP)**

**University of Connecticut, Storrs**

**Jeffrey D. Fisher, Ph.D., Director**  
*July 1, 2004 – June 30, 2005*



CENTER FOR HEALTH/HIV  
INTERVENTION AND PREVENTION

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Annual Report July 1, 2004 – June 30, 2005**

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## Annual Report Executive Summary

Center for Health/HIV Intervention and Prevention (CHIP)

July 1, 2004 – June 30, 2005

- **Expanded research enterprise:** During FY05, CHIP researchers launched major new interdisciplinary research initiatives in HIV prevention, medical adherence, and health behavior change, including new work in the areas of diabetes management, cancer prevention, substance abuse, nutrition, reproductive health, self-medication safety, pharmacology, telehealth, health communication and information technology, exercise adherence and cardiac health, and other health domains (p. 11).
- **International Research:** CHIP research is increasingly international in scope. Projects proposed by CHIP principal investigators have resulted in new initiatives in HIV prevention in China, India, Nepal, Romania, Russia, South Africa, Thailand, and Vietnam. (p. 9.)
- **Growth in externally funded research:** Again in FY05 CHIP has had extraordinary success in attracting external funding for its research. *Total costs awarded to CHIP PIs have increased 37.8.0% from FY04 to FY05.* Total costs have almost quadrupled since FY02 (in just three years), as have direct costs and F&A. At present, CHIP has \$8.1 million in total costs in active grants, \$6.3 million in direct costs, and \$1.7 million in indirect costs. Total costs awarded to CHIP PIs since 1999 equal \$28 million, direct costs equal \$21.2 million, and F&A in this interval equal \$6.7 million. (p. 6 and Appendix H).
- **Grants submitted:** *In the past year, CHIP PIs have increased their external grant submissions by 31% from FY04,* and at present, these submissions equal \$16 million in total costs, \$11.7 million in direct costs, and \$4.4 million in F&As. (Appendix I).
- **CHIP Graduate Student Funding:** Importantly, CHIP's funding successes also apply to CHIP graduate students, whose external funding has increased from \$59,346 in FY02 to \$103,000 in FY05, and which includes receipt of five prestigious NIH/NRSA graduate fellowship awards. (p.26 and Appendix H). CHIP external grants fund, on average, 12 full-time RAs per semester, and include graduate students of CHIP faculty in several departments.
- **CHIP research investment awards:** In FY05, CHIP organized research funding competitions in five award categories to stimulate new grant development and pilot work leading to future external grant applications submitted through CHIP. The five categories were: 1) *CHIP Research Grants for Principal Investigators*, 2) *CHIP Seed Grants to New Investigators*, 3) *Multidisciplinary Graduate Student Support*, 4) *Pilot Project Support for Graduate Students* and 5) *CHIP Conference Support* (p. 18). In FY05 four investigators and three graduate students submitted proposals in these areas, and a total of \$101,769 were applied for. CHIP research investment funds are awarded through a rigorous NIH-style panel review process that includes both a grant-writing mentoring component for applicants, and a reviewer mentoring process for junior reviewers who contribute to the review panel (p. 19).

- **CHIP Reviews to Help with Grant Development:** In FY05 CHIP created a new support mechanism to aid CHIP PIs and Affiliates preparing grant proposals for external funding. Affiliates planning to submit large, external grants through CHIP may apply to CHIP for funds to pay experienced external reviewers for mentoring reviews of their research proposals before they are submitted to external agencies. In FY05 six affiliates applied for this support, and \$2500 were provided to support 6 external reviews of new proposals.
- **Expanded multidisciplinary network:** During FY05, CHIP greatly expanded its multidisciplinary network of investigators to include over 70 research affiliates representing a broad range disciplines related to health behavior change (p. 29). The resulting community of expertise, spanning several University of Connecticut campuses and representing nearly all Schools and Colleges within the UConn system, as well as affiliates from other institutions, enables CHIP to assemble teams of investigators able to respond within short time frames to large-scale research funding opportunities as they arise.
- **Research Interest groups:** In FY05 CHIP formed several major, interdisciplinary research interest groups which will provide critical impetus for future growth. These groups bring together researchers from across the University of Connecticut system and nearby institutions to share findings and develop new research in key health problem areas. These are *cancer prevention, alcohol and drug abuse, medical and health disparities, diabetes prevention, and health communication and information technology*. Preliminary research by these groups will be supported by CHIP internal grant funds, and these groups will be able to request speakers for the CHIP lecture series. They have been active— attracting speakers from major federal funding agencies and developing new research proposals (p. 36).
- **Expanded lecture series:** CHIP continues to sponsor an impressive series of lectures and events that brought 22 nationally and internationally recognized leaders in health behavior research to the University of Connecticut campus in FY05. These visits and talks inform and strengthen CHIP research endeavors (p. 70, and Appendix G).
- **CHIP conferences:** In May of 2005, CHIP hosted two conferences involving world-renown attendees: “*Capacity Building for Translation of Effective HIV Prevention Interventions*” organized by CHIP affiliate Ann O’Connell of the Neag School of Education, and “*Perspectives on Positive Life Changes, Benefit-Finding, and Growth Following Illness,*” organized by CHIP affiliate Crystal Park, Clinical Psychology. These invited conferences brought together national leaders in new areas of investigation to share latest findings and plan innovative research collaboration.
- **Enhanced infrastructure:** CHIP has undertaken an expansion and reorganization of personnel and resources to better position it nationally and internationally as a leading multidisciplinary research center. Key among these changes was the addition of a full-time manager of operations, and a full-time, experienced, grants manager who is able to provide assistance to investigators with budget planning and grants management (p. 62). CHIP has improved its Web site <http://www.chip.uconn.edu> to link affiliates to CHIP resources and events, and to extend its international reach.

# Annual Report

Center for Health/HIV Intervention and Prevention (CHIP)

Jeffrey D. Fisher, Ph.D., Director  
July 1, 2004 – June 30, 2005

## 1. Mission

*The University of Connecticut's Center for Health/HIV Intervention and Prevention (CHIP) creates new scientific knowledge in the areas of health behavior, health behavior change, and health risk prevention and intervention. It provides theory-based health behavior and health behavior change expertise and services at the international, national, state, university, and community levels.*

Long Range Goals for the Center for Health/HIV Intervention and Prevention (CHIP)

*Goal 1: CHIP will provide an interdisciplinary nexus for investigators across the University of Connecticut system with research interests in health behavior, health behavior change, health risk intervention and prevention, and other areas involving health behavior change theory and method, for the purpose of stimulating multi-disciplinary collaborations and major new funded research initiatives in these areas.*

*Goal 2: CHIP will undertake research to create new scientific knowledge and new theoretical frameworks in the areas of health behavior, health behavior change, and health risk intervention and prevention. This work will focus on understanding the dynamics of unhealthy behavior, on the science of interventions to prevent or change such behavior, and on the science of disseminating effective intervention practice to the institutions charged with delivering health behavior change intervention.*

*Goal 3: CHIP will provide scientifically-based behavior change expertise for researchers within the University of Connecticut and the U.S. and international academic and health care communities.*

*Goal 4: CHIP will provide health behavior and health behavior change expertise, capacity building, and technology transfer for application by national, international, and local agencies and organizations performing health behavior change intervention.*

## **2. Introduction**

In November of 2001, the Chancellor and Provost and the Interim Vice Provost for Research of the University of Connecticut identified the existing Center for HIV Intervention and Prevention as a potential center of excellence at the University of Connecticut. At that time, the University invested start up funds in the center to begin to position it as a national and international leader in health behavior change research. Since then, with continued University support, CHIP has achieved impressive growth and structural change as a multidisciplinary research center. This report summarizes the actions taken by CHIP, now the *Center for Health/HIV Intervention and Prevention*, during the fourth year since this important agreement (FY05: July 1, 2004 - June 30, 2005) to realize its goals for growth, continued scholarly excellence, and international recognition.

## **3. Objectives for Year Four**

In the fourth year since its agreement with the University of Connecticut, CHIP continued to perform extraordinarily well in meeting the objectives that it established for the period. These objectives can be summarized as follows:

- 1) To increase the volume of externally funded research generated by the Center;
- 2) To expand the range of disciplines and health problem areas represented in CHIP research and grants;
- 3) To stimulate new health behavior research initiatives at UConn through CHIP Research Investment Capital grants to new and more senior investigators and to graduate students for proposals likely to lead to external funding;
- 4) To expand the CHIP multidisciplinary research network and to increase new research collaboration among CHIP affiliates;
- 5) To expand international research at CHIP;
- 6) To enhance the CHIP Research Center facility as a multi- and interdisciplinary hub for interaction among health scientists and behavior researchers at the University of Connecticut;
- 7) To disseminate CHIP research findings more widely to help populations most in need of the theory-based health behavior change interventions produced by the Center.

## **4. Progress toward Objectives**

### *1) Increase the volume of externally funded research*

Soon after entering into its agreement with the University, CHIP set as a goal to double its volume of externally funded grants in order to expand its research portfolio in critical areas and to extend its mission into new health domains. This was achieved during Year 2 when cumulative active and awarded grant activity rose from a total of \$7 million at the end of FY02 to over \$14 million dollars at the end of FY03. CHIP continues to expand its funded research. In the past three years, total costs have nearly quadrupled as have direct

costs and F&A. Cumulative active and awarded grants now stand at over \$28 million in total costs.

In FY05 alone, total costs awarded to CHIP PIs increased 37.8%. At present, CHIP has \$8.1 million in total costs in active grants, \$6.3 million in direct costs, and \$1.7 million in indirect costs (p. 6 and Appendix H). In addition, CHIP PIs have increased their external grant submissions by 31% from FY04, and at present, these submissions equal \$16 million in total costs, \$11.7 million in direct costs, and \$4.4 million in F&As. (Appendix I).

This extraordinary growth in research activity has been accomplished through three parallel initiatives. First, an early initiative brought key new investigators with impressive research backgrounds and grant portfolios to the University of Connecticut and to CHIP. A second important action has been the awarding of CHIP Research Investment Capital grants to CHIP principal investigators to develop major, new research at the University of Connecticut. Third, heightened efforts to expand the multidisciplinary profile of CHIP have resulted in a much broader portfolio of funded projects at CHIP that represent a wide range of academic and social science disciplines from across the University of Connecticut.

*2) To expand the range of disciplines and health problem areas represented in CHIP research and grants*

As mentioned above, a key focus for CHIP development in FY04 and FY05 has been to expand the range of disciplines represented by CHIP Principal Investigators (investigators with grants through CHIP), and to broaden the scope of health problem areas addressed in the health behavior research at CHIP. The leadership at CHIP has actively worked to encourage faculty conducting research in relevant health problem areas outside of HIV/AIDS (and from disciplines outside its original base in psychology), to become affiliates of CHIP, to participate actively in CHIP activities, and to develop and submit grants through CHIP. As a result, Principal Investigators with funded grants through CHIP increasingly reflect the very broad range of disciplines found in CHIP's multidisciplinary network. In addition, we encourage new faculty with expertise in relevant disciplines who have not previously worked in health research to explore links to areas under study at CHIP. This important outreach and broadening of scope enhances our ability to develop new directions for collaborative, multidisciplinary and interdisciplinary investigation.

*Some of the Principal Investigators extending the disciplinary scope of investigation at CHIP and their grant applications include:*

**Robert Broadhead**, Professor of sociology, CLAS: *International use of peer-driven health interventions for intravenous drug users*

**Ross Buck**, Professor of communication sciences, CLAS: *emotion and reason in decision making*

**Pamela Erickson**, Professor of medical anthropology, CLAS: *unintended pregnancy, socially transmitted infection, and use of barrier contraceptives among low-income minority youth*

**Ann Ferris**, Professor of nutritional sciences, CANR: *anemia, iron status, weight extremes, and diet quality outcomes in low-income, inner city children*

**Carol Lammi-Keefe**, Professor of nutritional sciences, CANR: *impact of DHA (docosahexaenoic acid) on the incidence and severity of post partum depression*

**Thomas Miller**, Professor of health promotion and allied health, School of Allied Health; *applications of telemedicine in rural communities*

**Patricia Neafsey**, Professor of nursing (pharmacology), School of Nursing: *reducing adverse self-medication practices in older adults*

**Chandra Osborne**, graduate student in psychology, CLAS: *diabetes management, and mortality salience, and priming of terrorist events*

**Linda Pescatello**, Associate professor of health promotion and allied health, School of Allied Health; *ACE genotype and exercise adherence as determinants of exercise response*

**Leslie Snyder**, Professor of communication sciences, CLAS: *impact of public health communication and family planning campaigns on reproductive health behaviors in developing countries*

**Jean Schensul**, Senior research scientist and founding director of the Institute for Community Research (ICR): *substance abuse and sex risk among urban youth in nightclub settings*

3) *To stimulate new health behavior research initiatives at UConn through CHIP Research Investment Capital grants to new and more senior investigators for proposals likely to lead to new external funding*

Since FY02 CHIP has awarded *CHIP Research Grants to Principal Investigators* to its more seasoned principal investigators to support work in new areas likely to lead to external funding. In FY03 CHIP added the *CHIP Research Investment Capital Seed Grant* initiative for new investigators, and in FY04 the competitions for *CHIP Multidisciplinary Graduate Student Support*, and *CHIP Conference Support*. In FY05 CHIP developed two additional categories for supporting research development, *Pilot Projects in Health Intervention and Prevention Research for Graduate Students*, and *CHIP Assistance with Reviews to Help with Grant Development*. (p. 20). (For announcements for each of these competitions, please see Appendices A-F).

The purpose of the new *Pilot Projects in Health Intervention and Prevention Research for Graduate Students* is to give CHIP-affiliated graduate students experience in preparing NIH-style grant proposals, and to allow successful applicants to conduct preliminary research in the context of their graduate study at UConn that is likely to lead to further successful applications for external funding. The purpose of the new *CHIP Assistance with Reviews to Help with Grant Development* funds is to give CHIP affiliates the opportunity to have near-final external grant proposals reviewed by seasoned CHIP investigators, and/or others outside the University, with extensive experience in successful



grant writing and grant review prior to submission of the applications to external funding agencies.

Funds for these competitions are awarded through a rigorous NIH-style review process conducted at CHIP that includes a mentoring component for junior faculty who serve on the faculty review committee with more senior colleagues. Graduate students serving on the graduate student review committee receive mentoring from senior NRSA recipients and faculty. All investigators submitting proposals to the CHIP competitions receive mentoring reviews from the CHIP panels to help them improve future grant proposals submitted to external agencies, whether their proposal to CHIP is funded, or not.

*4) To expand the CHIP multidisciplinary research network and to increase new research collaboration among CHIP affiliates*

FY05 saw important development of the CHIP multidisciplinary research network. The network now has over 70 confirmed affiliate members representing nearly all of the schools and colleges on the Storrs campus, the University of Connecticut Health Center in Farmington and members from other Universities, as well. Potential new members for the network continue to be identified, and the Center regularly makes contact with appropriate, newly identified individuals. In the past year, several multidisciplinary research teams have begun to pursue grants together as a result of this effort (p. 29) and new research interest groups have been created (p. 36).

*5) To expand international research at CHIP*

During the past two years, CHIP significantly extended its research programs in several areas outside the continental US. In August 2004, CHIP principal investigator **Seth Kalichman** was awarded a grant by the NIH/NIMH for his project entitled *Gender Violence and HIV Risk Reduction in South Africa*. This project complements Dr. Kalichman's existing NIH/NIAAA grant, *Alcohol and HIV Risk Reduction in South Africa*, (p. 15), and a grant funded by the World AIDS Foundation to conduct pilot HIV prevention work through the Human Sciences Research Council in Cape Town, South Africa. **Michelle Kaufman**, a graduate student working under the faculty sponsorship of Dr. Kalichman, has submitted a graduate fellowship proposal for additional research to NIH/NIMH/NRSA entitled, *Gender-tailored HIV Intervention for South African Women*. Dr. Kalichman has also submitted his fifth grant for work in South Africa to NIH/NIMH entitled *Brief HIV Prevention Counseling in South Africa (multisite)*.

In July 2004, **Jeffrey D. Fisher**, Director of CHIP, began work on a study to translate his *Options* intervention to HIV care clinics in South Africa. This study piloted an HIV prevention intervention in South Africa that was delivered by clinicians to HIV seropositive patients during their routine HIV clinical care. The study will assess whether *Options*, which has been highly successful in the U.S., can be modified for effective implementation in South Africa where anti-retroviral therapy is being introduced for the first time on a large scale. *Options* is the first clinician-delivered intervention aimed at assisting HIV+ patients to practice safer behaviors so they do not transmit HIV to others or reinfect themselves or their HIV+ partners with resistant virus or other pathogens.

**Susan Keine**, a graduate student under the sponsorship of **Jeffrey Fisher**, and co-sponsored by **Howard Tennen** at the University of Connecticut School of Medicine, was awarded a prestigious NIH/NRSA grant in 2004 to employ a daily processes research approach to study of the dynamics of HIV risk behavior in Durban, South Africa.

In April, 2004, CHIP graduate student **Michelle Kaufman**, was awarded a research grant by the Human Rights Institute (HRI) at the University of Connecticut entitled *Sex Trafficking in Nepal: Root Causes and Interventions*, to study the trafficking of young girls from Nepal for the sex trade in India. In January of 2005, she conducted face-to-face, semi-structured interviews with women who had previously been involved with the sex trade in Nepal or India and had returned to their communities. The interviews were conducted alongside additional research underway by **Mary Crawford**, a Professor in the Department of Psychology at UConn, who has been in Nepal for the past year on a Fulbright Fellowship. The aims of these studies are to learn about social and familial factors related to both forced and voluntary sex work in India and Nepal, and the relationship between sex work and HIV/AIDS. Qualitative data from Ms. Kaufman's study will be presented at the International Society for Political Psychology (ISPP) meeting in Toronto, and the "New View Conference—Women and the New Sexual Politics: Profits vs. Pleasures" in Montreal, both in July, 2005.

In April of 2005, Ms. Kaufman was awarded another grant from HRI to return to Nepal to conduct a quantitative street-intercept survey in Kathmandu to complement the qualitative data. The interview will focus on sex-trafficking, the rise in sex work in the Kathmandu Valley, reactions to the current political violence in the area, and knowledge and attitudes regarding HIV.

CHIP principal investigator **Blair Johnson** continues his collaboration with researchers in Romania to study HIV prevention among youth in Bucharest, Romania (p.15).

In addition to these projects and proposals, CHIP has also signed letters of agreement for academic and research exchange with the University of Costa Rica, the University of Puerto Rico, the University of Natal, South Africa, and the University of Naples, Italy.

*6) To enhance the new CHIP Research Center facility as a multidisciplinary hub for interaction among health scientists and behavior researchers at the University of Connecticut*

Since taking occupancy of the CHIP Research Center facility at 2006 Hillside Road on the University of Connecticut, Storrs campus in March 2003, CHIP investigators and administrative staff have worked to establish this 9000 square foot facility as a highly productive site for collaborative research in health behavior change. Dynamic expansion of CHIP multidisciplinary network of research affiliates and dramatic growth in CHIP's funded research portfolio in the past two years have demonstrated that housing investigators from multiple disciplines and their research teams at a single site greatly facilitates collaborative interdisciplinary research. Since moving into the facility less than

two years ago, CHIP investigators have competed successfully for \$12.3 million in total costs in new grants. CHIP is now at capacity within this facility and is exploring means to expand this winning formula of housing investigators from multiple, complementary disciplines together to enhance research development and productivity. (Please see discussion of CHIP Facility and Technology Goals, p. 62)

*7) To disseminate CHIP research findings more widely to help populations most in need of the health behavior change interventions produced by the Center*

An early goal of CHIP, and a hallmark of its research programs, has been to develop theory-based health intervention technology that can be easily deployed by others working in relevant communities to deliver health behavior change interventions to populations most in need of help. FY05 saw several key health interventions developed by CHIP principal investigators adopted by government agencies for wide and rapid deployment in high-risk communities in Connecticut and New York states (p.40). The Centers for Disease Control (CDC) in Atlanta, has selected an intervention developed by CHIP investigator **Seth Kalichman** to be included as a preferred intervention for distribution nationwide as part of their Diffusion of Effective Behavioral Interventions (DEBI) program (p. 41), and recently the Health Resources and services administration (HRSA) released an RFP for competitive proposals for 15 hospitals in the US to implement *Options*, an intervention developed by CHIP director, Jeffrey D. Fisher. (p.41).

*The remainder of this report consists of more detailed discussions of selected new initiatives at CHIP.*

## **5. Selected New Research Initiatives by CHIP Principal Investigators**

*In FY05, CHIP Principal Investigators and graduate students directed the following new and ongoing research activities (organized alphabetically by PI):*

In September, 2004 **Robert Broadhead**, Professor of sociology, CLAS, was awarded a prestigious 5-year NIH/NIDA “K02” independent scientist award to extend his widely-adopted work on HIV prevention for intravenous drug users (IDUs) globally. During the 1990s Dr. Broadhead developed an innovative prevention model for IDUs called the *Peer-Driven Intervention* (PDI) model, which is increasingly being used in the US as well as Vietnam, Thailand, China, and Russia—nations that lead the world in drug-related HIV infection rates. In the context of the award Dr. Broadhead will mentor and collaborate with international researchers to pursue an array of inter-related research initiatives in the four countries plus the US to study and enhance peer-recruitment and referral of IDUs for prevention services and health assessment, and to measure behavioral and health outcomes from peer-delivered educational interventions to reduce drug- and sex-related transmission of HIV among IDUs. The projects entail extensive and varied ethnographic and cross-cultural investigation to identify and distinguish features of illicit drug cultures in different national contexts, as well as delivery of important knowledge and technology transfer initiatives including training of international investigators and staff in skills for working

effectively with IDU populations, protection of human subjects protocols, the PDI model, and harm reduction approaches.

Dr. Broadhead is currently PI on an NIH/NIDA R01 *Preventing HIV among IDUs in Yaroslavl Russia*, employing the PDI to combat HIV among IDUs in three cities in Russia: Yaroslavl, Rybinsk and Tutaev. He is also serving as an investigator on the NIDA-sponsored project *Vietnam-China Cross-Border Project* (Ted Hammett, PI), in which he directs peer-driven interventions in Ha Giang, Vietnam and Guigang, China, comparing variations in the model at the two different sites, as well as their robustness and impact compared to two traditional outreach sites in Lang Son, Vietnam and Ning Ming, China.

In addition to the projects discussed above, Dr. Broadhead has just completed an adherence project for HIV+ drug users in Bridgeport, Connecticut and an ongoing project in Bangkok working using “respondent-driven sampling” to estimate the size of the IDU population in the greater Bangkok area.

In October 2004, **Deborah Cornman**, Ph.D. and Associate Director of CHIP, was awarded the second phase of an NIH/SBIR grant entitled *Internet-based Program to Train Clinicians in HIV Prevention Counseling*. In this project Dr. Cornman is collaborating with the software development firm, MedCases, Inc., of Philadelphia, PA, to design and test a three-step, Web-based continuing medical education (CME) program that provides infectious disease specialists and general internists with easy to access, high-quality, and up-to-date training in HIV risk reduction counseling for HIV positive patients.

This project was developed in the context of an ongoing HIV epidemic in the United States in which there are approximately 40,000 new cases of HIV infection reported each year. Despite major progress in improving the life expectancy of those living with HIV/AIDS, the new infection rate remains high. HIV Clinical care settings remain an important and underutilized venue for providing interventions to reduce the high-risk behaviors among HIV positive patients that lead to new infections in others. The project takes into account the limited availability of clinician time and the need to address a complex array of prevention issues around HIV/AIDS and other STDs for which many physicians have received little training.

Based on the successful Phase 1 pilot program conducted in FY04, this online training program is now being developed to provide didactic learning (Step 1), an opportunity to practice in a simulated patient environment (Step 2), and application of the knowledge in clinical practice, with ongoing reinforcement and evaluation (Step 3). This training involves the use of expert-delivered lectures that include video simulations of patient encounters and involve virtual role-playing, plus a monthly electronic newsletter. This Phase II program is aimed at infectious disease specialists and general internal medicine physicians, and is supported by an advisory board of experts that includes the Editor-in-Chief of *JAIDS (Journal of Acquired Immune Deficiency Syndromes)*. Offering this training program over the Internet provides a time-and cost-effective way for clinicians to access the learning modules at their convenience.

During FY05 Dr. Cornman also continued work on her grant through the Connecticut Department of Public Health, entitled *Capacity Building Assistance to HIV Prevention Programs*. In collaboration with community leaders at AIDS Project Hartford, in Hartford, CT, the study will develop, implement, and evaluate a capacity building model to increase the ability of organizations such as AIDS Project Hartford to provide prevention services to individuals living with HIV. Although the primary goal is to increase capacity at the organizational level, the project also explores recommendations for what needs to happen Statewide. Phase I of the project involves elicitation or formative research with patients, providers, and AIDS leaders to identify the needs, issues, and gaps that exist in the provision of prevention services to HIV + individuals and in the linkage of counseling services to care services. The project has identified all HIV prevention services in the state, and is conducting an organizational assessment of all Connecticut Department of Public Health-funded contractors. Based on the findings from the elicitation research, a capacity building model will be developed that will include statewide trainings, onsite technical assistance to 30 contractors, a tracking system, and a website of care and prevention services. The capacity building model is being evaluated through the use of multiple evaluation strategies.

**Michael Copenhaver**, Research Assistant Professor of psychology and a research affiliate at CHIP, continues work on his prestigious four-year NIH/NIDA “K02” independent scientist award to optimize harm reduction approaches for reducing HIV transmission rates among high-risk injection drug users (IDUs). In the context of this grant Dr. Copenhaver has been collaborating with Dr. Blair T. Johnson’s team to design and conduct a quantitative synthesis (meta-analysis) of the research literature pertaining to HIV prevention interventions targeting IDUs. Results of this effort were presented to an invited NIDA meeting, “Integrating HIV Prevention into Drug Abuse Treatment Research,” in September, 2004, Bethesda, MD.

Dr. Copenhaver is also the PI on an HIV prevention intervention effort funded by the Connecticut Department of Public Health, AIDS Division, *Harm Reduction HIV Prevention Intervention*. This grant involves directing a group-level HIV prevention intervention that has been successfully integrated into methadone maintenance treatment programs in New Haven over the past three years.

**Jeffrey Fisher**, Professor of psychology, CLAS, and Director of CHIP, and his team continue with their work on a very large five-year grant from NIH/NIMH entitled *Changing ART Adherence Behavior*, a project to develop and test an interactive, theory-based CD-Rom delivered intervention to improve adherence outcomes in HIV+ patients on anti-retroviral therapy (ART). When taken as prescribed, an ART drug regimen can have dramatic effects on the health and well-being of HIV+ individuals. However, whereas persons on ART must adhere rigorously to the regimen (take each dose as prescribed around 95% of the time) to achieve viral suppression, actual rates of adherence of 60-70% and lower are common in clinical care settings. Suboptimal adherence has been associated with serious individual and public health consequences related to poor viral suppression and development of drug resistance in HIV+ patients, yet few extant adherence interventions have been found to be effective in clinical care settings, and most

have proved too labor-intensive and expensive to deploy widely. This project involves development, piloting, implementation and rigorous evaluation of an interactive, computer-delivered intervention to be used by patients waiting in clinics for regularly scheduled health appointments. The intervention is based on the Information—Motivation—Behavioral skills (IMB) model of adherence (J. Fisher, Fisher, Amico, and Harman, in press), and will deliver individualized informational, motivational, and behavioral skills building content via engaging interactive media that employ motivational interviewing (MI) techniques (Rolnick, et al., 2000). The project is being designed to facilitate adoption of optimal levels of adherence behavior in new ART patients, and to enhance and maintain optimal adherence in long time ART patients. The research will evaluate and compare behavioral and health outcomes in intervention patients against appropriate standard of care control groups in five clinical sites in Connecticut in a rigorous 18-month clinical trial.

**Pamela Erickson**, Professor of medical anthropology, CLAS, is in the second year of her large, five-year grant, *Barrier Contraception Negotiation among Youth Aged 18-25*, funded by the Centers for Disease Control, Division of Reproductive Health (PHS/CDC), to study the social and cultural factors that influence sexual decision-making and social negotiation of use of barrier contraceptives among low-income minority youth. She is conducting multi-method qualitative research to investigate the contexts within which sexually active young adult African American and Latino women and men (ages 18-25) in Philadelphia, PA and Hartford, CT, communicate sexual values and negotiate barrier contraceptive use (use of male condoms, female condoms, or the diaphragm). Methods include focus groups with systematic cultural assessment, sexual relationship life history interviews, sexual behavior assessment via structured interviews, diaries, and scenario dramas. These data will be used to inform intervention models to encourage choices and effective negotiation skills for prevention of HIV/STDs and unplanned pregnancies leading to development of a client-centered and community based social marketing campaign to reduce unintended pregnancy and socially transmitted infections.

**Blair T. Johnson**, Professor of psychology, CLAS, is in the third year of a five-year project funded by the NIH/NIMH entitled *Syntheses of HIV Risk Reduction Research*, to analyze and organize existing knowledge regarding HIV transmission through behavior change. This synthesis will be achieved through a continuing series of seven rigorous, theoretically-guided meta-analyses. Study 1 gathered and synthesized studies evaluating prevention studies in developing regions and countries. Study 2 gathers and synthesizes studies evaluating prevention of HIV in IDU and drug-use behaviors. Study 3 examines gender differences in response to intensive HIV risk-reduction efforts. Study 4 determines how the content of risk reduction interventions relates to risk reduction effects obtained. Study 5 will evaluate the success of mass-media strategies for HIV prevention. Study 6 will compare HIV prevention effects to those obtained across public-health change literatures. Study 7 will examine how risk behaviors are caused by attitudes and other cognitions. By summing up the evidence to date on these important and quickly growing literatures, these meta-analyses will inform public health officials, community-based interventionists and scientists about which interventions work best, which components of

interventions have the largest impact, and the circumstances under which HIV risk-reduction interventions are most likely to be successful.

Using CHIP Research investment capital funds awarded in Years 1 and 2, Dr. Johnson, developed a study in collaboration with researchers at the University of Bucharest, Romania to determine levels of HIV transmission risk present in HIV positive youth in Bucharest. The preliminary study explored the biopsychosocial correlates of risk behaviors among these youth, with an end goal of planning an HIV prevention trial for young people in this population. Responses from 147 HIV positive youth were collected, and HIV risk survey data analyzed. Manuscripts are now in preparation for publication, and an R01 research proposal for a 4-year longitudinal project, estimated at approximately one million dollars, is being prepared for submission for external funding.

In FY05 **Seth Kalichman**, Professor of psychology, CLAS, was awarded a four-year NIH grant *Gender Violence and HIV Risk Reduction in South Africa*. This project entails developmental research to design and field test a theory-based behavioral risk reduction intervention for men who are at risk for perpetrating violence against women *and* at risk for contracting and transmitting HIV in Cape Town, South Africa. As many as one in five South Africans is HIV positive and there are an estimated 1600 new HIV infection in South Africa each day. South Africa also has the world's highest rates of violence against women. By employing sexual theory of gender and the Information-Motivation-Behavioral Skills (IMB) model of health promoting behaviors the team will conduct three stages of intervention development research: (Stage 1) Includes initial interviews, focus groups, and quantitative surveys with men and women in a community center in a Cape Town township. (Stage 2) Tests the feasibility of a newly developed intervention (based on Stage 1 research) with a small sample of men. Feedback will also be elicited on the intervention content from women in the community. Stage 2 will also test the feasibility of an audio-computer assisted interview for data collection in the community center. (Stage 3) Entails conduct of a randomized field test to determine the potential efficacy of the risk reduction intervention for South African men at risk for gender-based violence and HIV. Participants in the field test will be randomly assigned to either receive the newly developed intervention or a time matched attention comparison condition. Following a 6-month follow-up period, the team will assess differences and beliefs on HIV risk reduction constructs and intervention outcomes. Results of the proposed research will also provide critical information about the role of gender power differentials, attitudes toward women, and AIDS stigmas in HIV transmission risks in South Africa and will offer urgently needed strategies for improving HIV prevention interventions in South Africa.

During FY05 Dr. Kalichman also continued work on his NIH/NIMH grant, *Intervention to Close the Digital Divide in AIDS Care*, an intervention to improve HIV+ patients' access to and usage of the Internet to obtain HIV-related health information, and his NIH/NIAAA grant *Alcohol and HIV Risk Reduction in South Africa*. This international project involves developmental research to design and field test a theory-based behavioral risk reduction intervention for men and women who use alcohol and are at risk for HIV infection in the Western Cape of South Africa. Guided by the Information—Motivation—Behavioral skills (IMB) model of health promoting behaviors, the project will conduct 3 phases of

intervention development research that include: (1) initial interviews, focus groups, and quantitative surveys with men and women who use alcohol and are at risk for HIV transmission in a Black township in the Western Cape Province of South Africa. Based on information from rapid formative studies, this first phase of research will develop a theory-based alcohol related risk reduction intervention; (2) test the feasibility of the newly developed alcohol related HIV risk reduction intervention with a small sample of men and women who use alcohol and engage in sexual risk behavior, and (3) conduct a randomized field test to determine the potential efficacy of the alcohol risk reduction intervention for South African men and women. Participants in the field test will be randomly assigned to either receive the newly developed intervention or assigned to a time matched attention comparison condition. Following a 6-month follow-up period, differences between groups on behavioral outcomes will be measured. The project will also test the mediating effects of information, motivation, and behavioral skills constructs on intervention outcomes. Results of the proposed research will provide critical information about the role of alcohol in HIV transmission risks and will offer urgently needed strategies for improving HIV prevention interventions in South Africa.

**Kerry Marsh**, Associate Professor of psychology, is in the last year of a five year grant from the NIH/NIMH to study *Implicit Attitudes and HIV Risk Behavior*. The project involves a series of studies to redress limitations in current research on HIV sexual risk. Previous research has focused on deliberative, belief-based attitudes toward sexual risk behaviors. Sexual contexts, however, epitomize situations in which systematic retrieval of beliefs about condoms and HIV prevention might often be minimal. Recent theoretical advances suggest that in such contexts, behavior should be better predicted by implicit attitudes. Implicit sexual attitudes are evaluative responses that are automatically and effortlessly evoked by cues in a sexual situation and involve feelings rather than verbally articulated thought. This research employs new response latency methods to assess implicit condom attitudes. In two studies, three hundred HIV-positive individuals complete baseline self-report measures to assess their sexual behavior and explicit (belief-based) condom attitudes. Computerized priming and implicit association tasks are also used at baseline to assess implicit attitudes toward condoms and risk-related behavior. In a two-site trial, individuals at one clinic continue to receive their regular treatment; individuals at the other clinic begin a more intensive psychological intervention designed to make attitudes and sexual behavior become less risky. Six months later, all measures are repeated. For both groups, it is anticipated that implicit attitudes should predict subsequent sexual behavior (e.g., condom usage) in spontaneous contexts (e.g., occasional partners) better than will explicit attitudes, and the reverse is expected for deliberative situations (e.g., main partners). Individuals exposed to the intensive intervention should change implicit attitudes and reduce risky sexual behavior the most. Four other studies tested related hypotheses.

In January of 2004, **Thomas Miller**, Professor of Allied Health, PI, and co-investigators **Jeffrey Fisher**, Professor of psychology, and **Olga Jarrin**, a doctoral student in the School of Nursing, were funded by the State of Connecticut, Department of Public Health to conduct a study employing telehealth technology to improve adherence to anti-retroviral medications among HIV+ patients in the State of Connecticut. In FY05 the



project was expanded to provide broader reach in rural areas of Connecticut. Telehealth is the provision of healthcare, including health promotion and education, over distances using telephone-based technology. The project pilots the use of videophone technology to extend adherence support education and counseling resources for clients living with HIV/AIDS and on antiretroviral therapy (ART) in Connecticut. Participants are HIV+ individuals living in underserved areas of the State. The investigators have developed a telehealth network and system that links participants with several community based organizations, that are in turn linked with behavior change researchers at CHIP, and HIV medical experts at the University of Connecticut Health Center (UCHC) and the DPH Division of Infectious Diseases. Current community partners in this project include Hispanos Unidos, Project TLC, The Hartford Dispensary, Community Health Centers, Inc., Alliance for Living, Bridgeport Community Health Center, and Stamford Hospital's HIV Clinic.

Objectives of the project are to:

1. Create a system to improve access to first-rate HIV and adherence care for high-risk, underserved HIV+ patients in Connecticut
2. Pilot the use of telehealth technology as a vehicle to improve access to health care, adherence counseling, education and health promotion for HIV+ patients in Connecticut
3. Utilize resources and infrastructure at the University of Connecticut, the Connecticut Public Health Department, and community-based organizations to improve access to health care through telehealth technology to individuals in underserved communities
4. Evaluate the effectiveness of this approach for application in a broader context of health care delivery to HIV+ patients

*Selected new research initiatives by CHIP graduate students*

**Jennifer Harman**, a CHIP doctoral student in psychology, continues work on her prestigious NIH/NRSA individual pre-doctoral award entitled *A Relationship Oriented Model of HIV Risk Behavior* (faculty sponsor, **Blair T. Johnson**, Professor of psychology, CLAS). The purpose of the study is to 1) identify psychological HIV risk factors among recently and soon-to-be released male inmates and their intimate partners, 2) to use theory to enhance the quantitative understanding of these risk factors, and 3) to develop a relationship-oriented model of HIV risk behavior. The first phase of the research involved elicitation research (focus groups) within the New Haven and Hartford, CT communities and a pre-release prison in Connecticut in order to identify relationship-specific HIV risk factors. The second phase entailed development of a survey instrument to be administered to 100 men who have been released from prison within the last 6 months and their intimate partners. In the last phase, hierarchical structural equation modeling will be used to develop a relationship-oriented model of HIV risk behavior based on survey data collected from both members of each couple. The outcome of the proposed research will be one of the first HIV risk behavior models with a relationship focus that can also be analyzed on a dyadic level. In addition, the findings may suggest effective strategies to intervene with this at-risk population.

**Susan Keine**, graduate student in psychology (faculty sponsor, **Jeffrey D. Fisher**, Professor of psychology, CLAS), continues work on her prestigious four-year NIH/NRSA individual pre-doctoral award to study situational determinants of sexual risk behavior among individuals living with HIV/AIDS in South Africa. The project is an international collaboration with **Dr. Jeffrey Fisher** (CHIP) and **Dr. Howard Tennen** (UCHC), as well as professors of public health at the Nelson R. Mandela School of Medicine in Durban, South Africa. Little research has been done on the situational determinants of sexual risk behavior among individuals living with HIV/AIDS in South Africa and her research begins to address this deficit. She has completed pilot work on the project which collected daily data via phone interviews (a daily processes research approach) from participants for six weeks, and analysis of data is underway. It is one of the first studies, if not the first, to use this methodology in South Africa. The project acknowledges and explores the role of poverty, stressful daily events, mood, and alcohol use among other things as factors influencing sexual risk behavior—factors that make it difficult for individuals to consistently use condoms.

**Chandra Osborne**, a graduate student in psychology (faculty sponsor, **Jeffrey D. Fisher**, Professor of psychology, CLAS), was awarded a prestigious NIMH/NRSA in June, of 2004 to apply theory-based intervention technology developed at CHIP to improve diabetes self-management in patients with diabetes. As theory-centered approaches to nutritional education and disease management are still relatively rare in diabetes intervention, the project will develop and test a diabetes self-care intervention based on the Information—Motivation—Behavioral skills (IMB) model of behavior change (Fisher and Fisher, 1992). The study compares self-care and health outcomes for patients receiving a brief (90-minute) face-to-face counseling session containing IMB components, against patients receiving an information-only intervention, and a no-intervention control group.

## **6. CHIP Research Investment Capital Grant Competitions**

In FY05 CHIP conducted five competitions for CHIP Research Investment Capital funds. The purpose of these competitions is to provide pilot and seed grant resources to investigators to stimulate new research in health behavior change at UConn of the type and quality that is likely to lead to external funding. These categories include *CHIP Research Grants for Principal Investigators*, *CHIP Seed Grant Support for New Investigators*, *Multidisciplinary Graduate Student Support*, *CHIP Conference Support*, and new this year, *Pilot Projects in Health Intervention and Prevention Research for Graduate Students*. Calls for proposals for the five competitions in FY05 were sent to all CHIP affiliates and prospective affiliates December 1, 2004 with a deadline for receipt of proposals by January 15, 2005. (For announcements for each of these competitions, please see Appendices A-E).

The *CHIP Research Grants for Principal Investigators* competition is designed to provide funds to seasoned CHIP investigators preparing new, large R01 level grant submissions. The *CHIP Seed Grant Support* competition is designed to provide funds to new investigators developing external grant proposals in health behavior change for the first

time. The *Multidisciplinary Graduate Student Support* competition stimulates cross-disciplinary collaboration at CHIP by funding graduate students with strong research backgrounds in their home disciplines to contribute to research under development by faculty members in other health or behavioral science disciplines. The *CHIP Conference Support* competition permits CHIP investigators wishing to convene expert forums of investigators at CHIP to share insights into new, or under-explored, areas of research in health behavior change for the purpose of developing new, multi-institutional collaborations and establishing new lines of research.

The new competition, *Pilot Projects in Health Intervention and Prevention Research for Graduate Students*, gives graduate students the opportunity to prepare independent research proposals for original pilot work while in graduate school, and to be able to have their proposals reviewed by an NIH style panel. Intensive mentoring at CHIP has led to five CHIP graduate students having received prestigious NRSA fellowships while in the graduate program at UConn. Providing seed funds to CHIP graduate students should enable CHIP to become even more successful in attracting future fellowship support, such as the NRSA.

*NIH-style review panel process for review of CHIP research funding proposals:*

An important component of the CHIP research funding competitions is mentoring. All proposals submitted receive mentoring reviews from a rigorous NIH-style review panel that provides guidance on how to improve the proposal for subsequent external review, whether the project is ultimately funded by CHIP or not. The competition process also includes a “reviewer mentoring” component that involves senior reviewers coaching selected junior reviewers on the review process.

This year, Professor Jeffrey D. Fisher, Professor of Psychology and Director of CHIP, headed the internal grant review process for proposals from Ph.D. level CHIP affiliates. Kerry L. Marsh, Associate Professor of Psychology, headed up the review of graduate student proposals. Dr. Fisher assembled a prospective list of University of Connecticut reviewers affiliated with CHIP who were not applying for funds through CHIP this year, and whose respective disciplines reflected the range of disciplines in the submitted proposals. The final faculty review committee was composed of three senior professors who have served on NIH review panels, and four junior faculty. In addition, four additional UConn faculty participated on the panel to lend area expertise to particular grants, and five external reviewers were commissioned to lend area expertise. Dr. Fisher chaired the committee and made assignments for reviewers for the faculty grants. He also prepared the summary statements for applicants, based on reviewer comments and committee discussion. Jody Flanagan of CHIP provided communication and logistical assistance for the faculty review process. Dr. Marsh chaired the committee for graduate student grants, and prepared the reviewer comments for that review.

The NIH guide for grant reviewers was used for training the new reviewers for both faculty and graduate review panels. All NIH rules of confidentiality, conflicts of interest, and for structuring and scoring reviews were adhered to. All review assignments included

a mix of senior and junior reviewers, with at least one experienced reviewer for each proposal.

The review meetings were structured and conducted as typical study section meetings at which primary, secondary and third reviewers gave their initial scores, then their reviews, followed by discussion and then scoring. The committees were also charged with making funding recommendations, so reviews were scored by open polling, followed by the groups deriving consensus scores. The committees also had the power to revise the budgets in the grants, in the way that NIH committees can make budget recommendations.

Four faculty proposals representing \$101,769 in applications, and three graduate student proposals representing \$4,500 were submitted in the first round. Two faculty applicants were invited to revise and resubmit their proposals based on recommendations from the first review meeting, and both grants were resubmitted. Final review of the faculty grants will be conducted on July 11, 2005, and funds will be awarded at that time. Three graduate applicants were asked to resubmit their proposals, and two graduate student proposals were funded for a total of \$2,775.

#### *CHIP Grant Reviews:*

In FY05 CHIP developed a new category of research support that is not a competition in the same way that the other stimulus mechanisms are. *CHIP Assistance with Reviews to Help with Grant Development* permits CHIP affiliates preparing major proposals for external funding may apply for a CHIP pre-review of their proposal at any time with prior notice before the planned submission date to the external agency. Once a review is requested, and the proposal is prescreened, CHIP will identify an experienced grant reviewer, either from within CHIP, or from another institution with appropriate expertise in the area of the grant application. CHIP internal reviewers review the grant in the context of their affiliation with CHIP; external reviewers are compensated by CHIP for their time to review and provide a mentoring critique of the proposal to the applicant prior to its finalization and submission.

#### *CHIP Conferences:*

Through its grants competition initiative, CHIP also hosted two conferences in FY05 involving world-renown attendees. The first was "*Perspectives on Positive Life Changes, Benefit-Finding, and Growth Following Illness,*" organized by CHIP affiliate Crystal Park, clinical psychology, CLAS; the second was "*Capacity Building for Translation of Effective HIV Prevention Interventions,*" organized by CHIP affiliate Ann O'Connell, of the Neag School of Education. These invited conferences brought together national and international leaders in new areas of investigation to share latest findings and plan innovative research collaboration.

The *Perspectives on Positive Life Changes* conference was convened at the University of Connecticut Storrs campus on May 20- 21, 2005. The conference was attended by over 50 people, including prominent figures in the field of psychological adaptation to illness. Selected University of Connecticut graduate students were also invited to attend. The conference was specifically designed to create a high-level venue for researchers and

clinicians to discuss original research work and theoretical perspectives on positive adaptation to illness, including processes of benefit-finding, growth and meaning-making following illness and trauma. Eleven keynote or main presentations were delivered, eight roundtable discussions, and 20 poster sessions. Attendees came from all over the US, as well as Germany, Canada, and New Zealand. The conference was jointly sponsored by CHIP and the American Psychological Association (APA). A book deal is pending with APA for publication of the proceedings.

The conference on “*Capacity Building for Translation of Effective HIV Prevention Interventions*,” was held May 22-24, also at the University of Connecticut, Storrs, campus.

This conference brought leaders from prominent health intervention research programs from around the country, and from the CDC in Atlanta, to meet with researchers, clinicians and representatives of State agencies and community-based organizations (CBOs) in Connecticut, to share findings and experiences related to increasing the capacity of agencies and service organizations to enhance dissemination and utilization of tested, effective behavioral interventions locally, statewide, or nationally. Sessions covered numerous strategies for establishing and sustaining partnerships among community organizations, researchers, and State organizations; defining and measuring fidelity to program models; characteristics of organizations, communities, and interventions being replicated that can affect fidelity of the translation; means to improve fidelity; and facilitators and barriers to successful implementation of programs. Over 40 faculty, researchers, representatives of agencies and CBOs, and selected UConn graduate students, attended.

## **7. Active CHIP Research Grants** (as of June 30, 2005)

During FY04, CHIP principal investigators directed and submitted an impressive array of externally sponsored research. (Please see financial summaries of CHIP grant activity, Appendix H).

*CHIP grants (active, awarded, or approved) during FY05 include:*

*Active grant:* “Global Expansion of Peer-Driven Interventions” NIH/NIDA grant award, K02 DA017615. September 1, 2004 – August 31, 2009. Total costs \$624,622.

Principal Investigator: **Robert S. Broadhead, Ph.D.**

*Active grant:* “Preventing HIV among IDUs in Yaroslavl Russia” NIH/NIDA grant award, R01 DA14691. September 25, 2002 – June 30, 2006. Total costs \$653,600.

Principal Investigator: **Robert S. Broadhead, Ph.D.**

*Active Supplement:* “Preventing HIV among IDUs in Yaroslavl Russia.” NIH/NIDA supplement award. September 1, 2004 – June 30, 2006. Total Costs \$130,618. Principal Investigator: **Robert Broadhead, Ph.D.**

*Active grant:* “Optimizing HIV Risk Reduction for HIV Positive IDUs,” NIH/NIDA grant award, 1 K23 DA017015. September 26, 2003 – June 30, 2007. Total costs \$546,936. Principal Investigator: **Michael M. Copenhaver, Ph.D.**

*Active subcontract:* “Harm Reduction HIV Prevention Intervention.” State of Connecticut Department of Public Health subcontract 0301P900. July 1, 2002 – June 30, 2005. Total costs of UConn subcontract \$76,455. Principal Investigator: **Michael M. Copenhaver, Ph.D.**

*Active grant:* “Translation of Options/Opciones Intervention into Standard of Care.” New York State Department of Health AIDS Institute. July 1, 2003 – June 30, 2005. Total costs \$320,000. Principal Investigator: **Deborah H. Cornman, Ph.D.**

*Active grant:* “Capacity Building Assistance to HIV Prevention Program.” State of Connecticut Department of Public Health. April 1, 2003 – March 31, 2006. Total costs \$112,317. Principal Investigator: **Deborah H. Cornman, Ph.D.**

*Active grant:* “Internet-based Program to Train HIV Clinicians in HIV Prevention Counseling: Phase II” NIMH/SBIR. October 10, 2004 – September 30, 2006. Total costs \$225,000. Principal Investigator: **Deborah H. Cornman, Ph.D.**

*Active grant:* “Communication and Negotiation about Barrier Contraceptive Use among Young Adults at Risk.” PHS/CDC. September 30, 2003 – September 29, 2008. Total costs \$2,250,030. Principal Investigator: **Pamela I. Erickson, Ph.D.**

*Active grant:* “Changing ART Adherence Behavior.” NIH/NIMH R01 MH0666684. September 19, 2003 – June 30, 2007. Total costs \$5,099,849. Principal Investigator: **Jeffrey D. Fisher, Ph.D.**

*Active grant:* “Physician-Delivered Intervention for HIV Positive Individuals,” NIH/NIMH grant award, 1R01 MH59473. July 15, 1999 – June 30, 2005. Total costs \$3,441,867. Principal Investigator: **Jeffrey D. Fisher, Ph.D.**

*Active grant:* “A Relationship-Oriented Model of HIV Risk Behavior” NIMH/NRSA grant award, 1 F31 MH069079-01. August 1, 2003- July 31, 2005. Total Costs \$63,716. Principal Investigator: **Jennifer J. Harman** (Blair T. Johnson, PhD., Faculty Sponsor).

*Active grant:* “A Relationship-Oriented Model of HIV Risk Behavior.” SPSSI grant award. September 1, 2003 – August 15, 2005. Total Costs \$1,000. Principal Investigator: **Jennifer J. Harman** (Blair T. Johnson, PhD., Faculty Sponsor).

*Active grant:* “Syntheses of HIV Risk Reduction Research.” NIH/NIMH grant award, 2 R01MH58563-06A1. December 1, 2002 – November 30, 2007. Total Costs \$2,121,256. Principal Investigator: **Blair T. Johnson, Ph.D.**

*Active grant:* “Intervention to Close Digital Divide in AIDS Care.” NIH/NIMH grant award, R01 MH636666. June 12, 2001 – May 31, 2005. Total costs \$1,698,013. Principal Investigator: **Seth C. Kalichman, PhD.**

*Active grant:* “Alcohol and HIV Risk Reduction in South Africa.” NIH/NIAAA grant award, R21AA014820. April 1, 2004 – March 31, 2007. Total Costs \$941,841. Principal Investigator: **Seth C. Kalichman, PhD.**

*Awarded grant:* “Brief HIV Prevention Counseling in South Africa (Multisite).” NIH/NIMH. April 1, 2005 – March 31, 2010. Total Costs \$3,125,678. Principal Investigator: **Seth C. Kalichman, PhD.**

*Active grant:* “Gender Violence and HIV Risk Reduction in South Africa.” NIH/NIAAA grant award, R01MH071160. August 1, 2004 – July 31, 2008. Total Costs \$2,007,983. Principal Investigator: **Seth C. Kalichman, PhD.**

*Active grant:* “Dynamics of HIV Risk Behavior: A Daily Process Approach.” NIH/NRSA F31 MH072547. July 1, 2004 – June 30, 2007. Total Costs \$95,159. Principal Investigator: **Susan Kiene, MA** (Jeffrey D. Fisher, PhD., Faculty Sponsor).

*Active grant:* “Stress and Negative Affect: A Daily Process Study of HIV-Risk Behavior Among HIV-Positive Individuals in South Africa.” October 1, 2004 – December 31, 2004. Total Costs \$1,000. Principal Investigator: **Susan Kiene, MA** (Jeffrey.D. Fisher, PhD., Faculty Sponsor).

*Active grant:* “Implicit Attitudes and HIV Risk Behavior.” NIH/NIMH grant award, R01 MH62275. April 1, 2001 – May 31, 2006. Total costs \$781,890. Principal Investigator, **Kerry L. Marsh, Ph.D.**

*Active grant:* “Telehealth Intervention Project for HIV Adherence and Compliance.” State of Connecticut Department of Public Health/MOA. MOA04DPH0259AA. July 1, 2004 – December 31, 2004. Total costs \$10,000. Principal Investigator: **Thomas W. Miller, PhD.**

*Active grant:* “A Brief Intervention to Improve Diabetes Control.” NIMH/NRSA grant award. F31 DK067022. June 1, 2005 – May 31, 2007. Total costs \$113,736. Principal Investigator: **Chandra C. Osborne, MA** (Jeffrey D. Fisher, Faculty Sponsor).

*Active grant:* “A Brief Intervention to Improve Diabetes Control.” SPSSI dissertation award. January 1, 2005 – August 1, 2005. Total costs \$1,000. Principal Investigator: **Chandra C. Osborne, MA** (Jeffrey D. Fisher, Faculty Sponsor).

*Active grant:* “Conference on Health Psychology Perspectives on Positive Life Changes Following Illness.” APA (co-sponsored by CHIP). September 20, 2004 – December 19, 2005. Total costs \$14,510. Principal Investigator: **Crystal Park, PhD.**

## 8. Submitted CHIP Grant Applications (as of June 30, 2005)

In addition to grants currently active and awarded, CHIP faculty and affiliates have submitted new grant applications that represent over \$16 million in total costs. (Please see financial summaries, Appendix I).

*New grant applications submitted:*

*Proposal Submitted:* “Alcohol-involved sexual risk behavior among HIV+ persons” Submitted to NIH on May 1, 2005. January 1, 2006-December 31, 2008. Total Costs \$397,832. Principle Investigator: **William Barta, PhD**. Co-Investigators: **Khamis Abu-Hasaballah, PhD** & **Howard Tennen, PhD**.

*Proposal Submitted:* “Emotion and Reason in Decision Making about Safe Sex” Submitted to NIH/NICHD on May 1, 2005. January 1, 2006-December 31, 2008. Total Costs: \$811,120. Principle Investigator: **Ross Buck, PhD**. Consultant: **Jeffrey D. Fisher**.

*Proposal Submitted:* “CBT to Prevent HIV Among Pregnant Drug Abusers in Treatment.” Submitted to NIH/NIDA on May 1, 2005. December 1, 2005 – November 30, 2007. Total Costs \$402,968. Principal Investigator: **Michael Copenhaver, PhD**.

*Proposal Submitted:* “CBT to Prevent HIV Among Pregnant Drug Abusers in Treatment.” Submitted to NIH/NIDA on May 1, 2005. November 1, 2005 – September 30, 2009. Total Costs \$2,110,751. Principal Investigator: **Michael Copenhaver, PhD**.

*Proposal Submitted:* “The Enhanced AIDS Education Intervention for High Risk IDU's.” Submitted to Connecticut Department of Public Health on March 21, 2005. July 1, 2005-June 30, 2008. Total Costs \$144,526. Principle Investigator: **Michael Copenhaver, PhD**.

*Proposal Submitted:* “Development of Training and Implementation Materials for Options Intervention.” Submitted to CDC on January 7, 2005. July 1, 2005 – December 31, 2006. Total Costs \$350,000. Principal Investigator: **Deborah Cornman PhD**.

*Proposal Submitted:* “Translation of Options/Opciones Intervention into Standard of Care.” Submitted to NY State Department of Health, AIDS Inst. on February 24, 2005. April 1, 2005 – March 31, 2006. Total Costs \$192,460. Principal Investigator: **Deborah Cornman, PhD**.

*Proposal Submitted:* “Training in Social Processes of HIV/AIDS.” Submitted to NIH/NIMH on July 23, 2004. May 1, 2005 – April 30, 2010. Total Costs \$2,074,523. Principal Investigator: **Seth Kalichman, PhD**. (To be run through CHIP in collaboration with the Social Psychology Division).



*Proposal Submitted:* “Gender – Tailored HIV Intervention for South African Women.” Submitted to NIH/NIMH NRSA on September 1, 2004. June 1, 2005 – March 31, 2008. Total Costs \$150,107. Principal Investigator: **Michelle Kaufman, BA (Seth Kalichman, PhD, faculty sponsor).**

*Proposal Submitted:* “Reducing Adverse Self Medication Behaviors in Older Adults with Hypertension.” Submitted to NIH on October 1, 2004. July 1, 2005 – June 30, 2008. Total Costs \$1,039,593. Principal Investigator: **Patricia J. Neafsey, PhD.** Co-Investigators: **Elizabeth Anderson, PhD., Carolyn Lin, PhD** and **Zoe Strickler, Mdes.**

*Proposal Submitted:* “ACE Genotype & Exercise Adherence as Determinants of the Exercise Response.” Submitted to NIH/NHLBI on June 1, 2005. April 1, 2006-March 31, 2011. Total Cost \$3,785,333. Principle Investigator: **Linda Pescatello, PhD.** Co-Investigators: Nancy Rodriguez, PhD. and Consultant: Jeffrey Fisher, PhD.

*Proposal Submitted:* “Casual Sex Scripts: Destination Spring Break.” Submitted to SSSS on September 1, 2004. November 1, 2004 – October 31, 2005. Total Costs \$1,000. Principal Investigator: **David Portnoy, BA (Kerry Marsh, PhD, Faculty Sponsor).**

*Proposal Submitted:* “Using Hypocrisy to Reduce Casual Sex Behavior of Students on Spring Break.” Submitted to SPSSI on November 1, 2004. February 1, 2005 – January 31, 2006. Total Costs \$1,000. Principal Investigator: **David Portnoy, BA (Kerry Marsh, PhD, Faculty Sponsor).**

*Proposal Submitted:* “Creation of a Center of Excellence in Health Communication & Marketing at the University of Connecticut.” Submitted to DHHS/CDC on May 16, 2005. September, 1 2005 – August 30, 2008. Total costs \$3.8 million. Principal Investigator: **Leslie B. Snyder, Ph.D.,** Co-principal Investigators: **William D. Barta, Ph.D., Carolyn, Lin, Ph.D, and Jean J. Schensul, Ph.D.** Two R01 proposals submitted with this Center Grant include: “A Site-based Social Marketing Intervention to Prevent Party Drug Use with Urban Youth,” \$667,000, Principal Investigator, **Jean J. Schensul, Ph.D.,** and “HIV Prevention Computer Game for Urban Minority Emerging Adults,” Principal Investigator: **Leslie Snyder,** and Co-principal investigators **William D. Barta, Ph.D.,** and **Carolyn Lin, Ph.D.** \$979,875.

## **9. New CHIP Post-doctoral Investigators**

FY05 brought a new post-doctoral associate to CHIP, **Paul A. Shuper, Ph.D.,** to join continuing Post-Doctoral Fellows **Natalie Dove-Smoak, Ph.D.,** and **William D. Barta, Ph.D.** who collaborate with CHIP PIs on funded research and pursue their own independent research.

**Paul Shuper, Ph.D.** joined the research team of Dr. Jeffrey Fisher in August, 2004, to contribute to work on the grant *Changing Art Adherence*, a medical adherence intervention for HIV positive individuals on antiretroviral therapies. Dr. Shuper holds the

Ph.D. in Psychology from the University of Western Ontario, in London, Ontario. Dr. Shuper's work involves assessment of interpersonal, and situational parameters related to healthy and unhealthy courses of action, and development of laboratory and field experiments to provide insight into causal social factors as predictors of health related behavioral patterns. Paul has conducted studies in several health areas, including the occurrence of risky sexual behavior in HIV positive individuals, and social and individual factors associated with repeat abortions. He is currently working on development of innovative, interactive, computer intervention technology in the area of adherence to antiretroviral therapies with Dr. Fisher.

**Natalie Dove-Smoak, Ph.D.** has joined the research teams of Drs. Blair Johnson and Kerry Marsh in 2004 to contribute expertise to projects under their direction at CHIP, and to develop her own new work. Dr. Smoak's interests in basic social psychological research include intergroup bias, implicit attitudes, the impact of romantic relationships on health behaviors, and gender stereotypes. She is a research associate on Kerry Marsh's grant examining the role of implicit associations between condoms, sexuality, and positivity as related to HIV risk behaviors. Dr. Smoak is also working for Dr. Blair Johnson's meta-analysis to examine the effectiveness of HIV interventions in developing countries and the role of condom distribution on sexual frequency. While at Purdue University, Dr. Smoak's research focused on intergroup bias from the perspective of emotion. In particular, her dissertation examined the role of changing implicit associations between negative emotions and outgroup members and how that change at the implicit level affected nonverbal behaviors within intergroup interaction. Additionally, she has examined the role of relationship commitment in contraceptive behaviors and the malleability of implicit gender stereotypes. She holds the M.S. from Purdue University, West Lafayette, Indiana (May 2001) and the Ph.D. from Purdue (May 2004).

**William D. Barta, Ph.D.** joined the research team of Dr. Jeffrey Fisher in September, 2003, to contribute work on the grant *Changing Art Adherence*, a medical adherence intervention for HIV positive individuals on antiretroviral therapies (p. 11). Dr. Barta holds the Ph.D in Psychology from Southern Methodist University in Dallas, Texas. Dr. Barta has conducted prior research in the areas of emotional self-regulation, dating infidelity, computer-assisted interventions for health behavior change. His work at CHIP has been focused on health behavior related to adherence to antiretroviral therapies, HIV sexual risk behavior of emerging adults and low socioeconomic status individuals living with HIV, factors related to substance abuse in relation to HIV risk behavior and medical adherence, and daily process methodology.

## **9. CHIP Graduate Student Research Achievement**

Notable in CHIP's growth profile are the tremendous opportunities for academic achievement available to graduate students working with investigators at CHIP. In the past four years five CHIP graduate students have been awarded the prestigious Individual National Research Service Award (NRSA) Pre-doctoral Fellowship from the National

Institutes of Health, one of the most sought-after awards for doctoral support in the social sciences. These students are:

**Jennifer Harman** (5<sup>th</sup> year, Social Psychology), “*A Relationship-Oriented Model of HIV Risk Behavior.*” 3-year NRSA award, August, 2003 – July 2005, total award \$81,432. [mentor: Blair Johnson (p. 12)]

**Chandra Osborn** (3<sup>rd</sup> year, Social Psychology), *A Brief Intervention to Improve Diabetes Control.*” 1-year NRSA award, January 2004 - December 2005, total award \$83,454 [mentor: Jeffrey Fisher (p. 17)].

**Susan Kiene** (2<sup>nd</sup> year, Social Psychology), *Dynamics of HIV Risk Behavior: A Daily Process Approach.*” 3-year NRSA award, June 2004 – February 2007, total award \$116,432 [mentor: Jeffrey Fisher (p.14)].

**Josephine Korchmaros**, “*HIV Coping and Safer Behavior: A Theoretical Approach.*” 3-year NRSA award. October 2000 – October 2003, total award \$81,432. [mentor: Jeffrey Fisher].

**Anthony Lemieux**, “*A Theoretical Approach to Music-based HIV Prevention,*” December 2001 – November 2003, total award \$54,088 (mentor: Jeffrey Fisher).

Two of these NRSA fellows, Josephine Korchmaros and Anthony Lemieux students have completed their Ph.D.s and have moved directly from their graduate experience at CHIP into junior faculty positions at research universities (Southern Illinois University, Carbondale, IL, and SUNY, Purchase, NY). Jennifer Harman will complete her dissertation in August 2005, and has accepted an Assistant Professorship in the Department of Psychology, Boulder CO. A sixth CHIP graduate, Aaron Smith-McClallen, has been awarded a highly prestigious post-doctoral appointment at the University of Pennsylvania, Philadelphia, PA under the direction of Professor Martin Fishbein. The consistently high achievement of CHIP graduate students demonstrates the tremendous benefit to students who are able to study in the context of the rich, multidisciplinary and collaborative intellectual climate at CHIP.

A number of graduate students working with CHIP affiliated faculty and principal investigators received numerous awards and honors in the past year, including those mentioned above.

**Dovidio:** & Pratto: Saguy, T. Accepted to the two-week Summer Institute in Social Psychology, University of Michigan, Ann Arbor, awarded July 24-August 6, 2005. [Mentors: F. Pratto & **J. Dovidio**]

**Dovidio:** Saguy, Tamar: Selected for the Society for Personality and Social Psychology Summer School, July 2005, total award approximately \$1000 [mentor: **J. Dovidio**]

**Fisher:** Kiene, Susan M.: Recipient of the Clarence J. Rosencrans Scholarship 2004-2005 from the American Psychological Foundation (APF) COGDOP Scholarship in Psychology. Total award \$2,000 [mentor: J. Fisher].

**Fisher:** Kiene, Susan M.: Ruth L. Kirschstein National Research Service Award, Individual Pre-doctoral Fellowship F31MH072547-01 (NIMH/National Institutes of Health). Research

Title: *Dynamics of HIV Risk Behavior: A Daily Process Approach*, July 2004-July 2007, total award \$116,432 [Mentors: **J. Fisher**: & **H. Tennen**].

- Fisher:** Kiene, Susan M.: Elected Member-at-Large for the Society of Personality and Social Psychology Graduate Student Committee, Division 8, APA, January 2004-January 2005 [Mentor: **J. Fisher**].
- Fisher:** Kiene, Susan M.: Grants-in-Aid Award, Society for the Psychological Study of Social Issues (SPSSI; Division 9, APA) for a proposal titled: *Stress and Negative Affect: A Daily Process Study of HIV-Risk Behavior among HIV-Positive Individuals in South Africa*. \$1000, awarded Spring 2004 [Mentor: **J. Fisher**].
- Fisher:** Kiene, Susan M.: Scholarship to attend the 7<sup>th</sup> International AIDS IMPACT Conference, Cape Town, South Africa, April 2005, Registration waiver, approximately \$500 [Mentor: **J. Fisher**].
- Fisher:** Kiene, Susan M.: Scholarship to attend the XV International AIDS Conference, Bangkok, Thailand, July 2004, Registration waiver, approximately \$650 [Mentor: **J. Fisher**].
- Fisher:** Osborn, Chandra: Recipient of an American Psychological Association Dissertation Research Award, December 2004, total award \$1,000 [mentor: **J. Fisher**].
- Fisher:** Osborn, Chandra: Recipient of an Individual National Research Service Award Pre-Doctoral Fellowship. National Institutes of Health. Research Title: *A Brief Intervention to Improve Diabetes Control*. January 2004-December 2005, total award \$83,454 [mentor: **J. Fisher**].
- Johnson:** Harman, Jennifer: Receipt of a 2004 Student Research Award from the American Psychological Association, Division 38 (Health Psychology). Research Title *A Relationship-Oriented Model of HIV Risk Behavior*, total award \$1,200 [mentor: **B. Johnson**].
- Johnson:** Harman, Jennifer: Recipient of an Individual National Research Service Award Pre-Doctoral Fellowship. National Institutes of Health. Research Title: *A Relationship-Oriented Model of HIV Risk Behavior*. August, 2003-July 2005, total award \$81,432 [mentor: **B. T. Johnson**].
- Johnson:** Scott-Sheldon, Lori A J.(g) Elected as Chair of the Society for the Psychological Study of Social Issues (SPSSI) Student Committee, Division 9, APA, 2004-2005 [mentor: **B. T. Johnson**]
- Johnson:** Scott-Sheldon, Lori A. J. (g) (Co-Investigator), *Implicit-Explicit Ambivalent Attitudes and Health Behaviors* (March 2004-December 2004). Faculty Research Grant, Center for Health/HIV Intervention and Prevention, University of Connecticut (\$20,224 total direct costs) [mentor & co-investigator: **B. T. Johnson**].
- Kalichman:** Kaufman, Michelle: Elected to the 2004-2005 Society for the Psychological Study of Social Issues Graduate Student Committee as Newsletter/Web Editor [advisor: **Kalichman**]
- Marsh:** Portnoy, David (g): (Investigator), Graduate Student Research Grant, Center for Health/HIV Intervention and Prevention, University of Connecticut (\$1,275 total direct costs) [mentor: **B. T. Johnson**].



## 11. CHIP Multidisciplinary Affiliates Collaborative Network

In FY05 the CHIP multidisciplinary network of affiliated researchers grew substantially, from 54 affiliates in FY04 to 73 currently. Particularly noteworthy in this expansion is growth in the breadth of disciplines now represented among principal investigators with grants through CHIP. CHIP continues to identify individuals across the University of Connecticut system who conduct research in the areas of health behavior, health risk dynamics, and behavioral change, and/or who have expertise in HIV/AIDS prevention and intervention. The goal of this outreach is to build a dynamic, diverse, collaborative research network within the University of Connecticut system that is able to respond quickly and expertly to new, multi- and interdisciplinary opportunities as they arise.

Faculty identified through our outreach process are contacted by CHIP, and if relevant interests and collaborative potential are found, they are invited to affiliate. Benefits to CHIP affiliates include, first, the opportunity to collaborate with excellent, well-published and funded researchers from many fields related to health behavior change. Second, CHIP can assist with the formation of teams, large and small, to develop and execute multi- or interdisciplinary projects related to health behavior change, and to help with linking these teams to excellent funding opportunities. Third, as reported above, the Center uses a significant portion of its funds to foster new pilot health behavior change research that is likely to lead to external funding. Along with creating and supporting multidisciplinary teams and funding novel research, CHIP's administrative Core also provides services to investigators with grants routed through CHIP in the form of budget tracking and accounting for active grants.

### *Some selected new multidisciplinary collaborations*

As a result of CHIP's efforts to bring multidisciplinary players together, several new collaborations have formed around grants in development or that have been recently submitted. Among these (some reported in more detail above) are:

1) A telehealth initiative developed at CHIP and funded by the CT Department of Public Health involves CHIP investigators **Tom Miller**, School of Allied Health, **Jeffrey Fisher**, Department of Psychology, **Kevin Dieckhaus, M.D.**, Infectious Diseases at the UConn Health Center in Farmington, and **Olga Jarrin**, a graduate student in School of Nursing, in partnership with a number of community-based organizations in the State. The project employs video-telephone technology to improve and extend an adherence counseling intervention for underserved HIV+ populations in the State of Connecticut (p. 16).

2) **Patricia Neafsey**, (pharmacology) School of Nursing, **Elizabeth Anderson**, School of Nursing, **Carolyn Lin**, Communication Sciences, CLAS, and **Zoe Strickler**, visual communication design, CHIP, submitted an R01 to NIH/AHQ in October 2004 entitled *Reducing Adverse Self-Medication Behaviors in Older Adults* in response to the program announcement "Understanding and Promoting Health Literacy."

3) **Susan Kiene**, graduate student in Psychology, is collaborating with **Jeffrey Fisher**, Director of CHIP, **William Barta**, CHIP postdoctoral fellow in Psychology, and **Howard**

**Tennen**, of the Department of Community Medicine and Health Care, UCHC, on her NIH/NSRA grant *Dynamics of HIV Risk Behavior: A Daily Process Approach* in Durban, South Africa, (p. 18).

4) **William Barta**, post-doctoral fellow at CHIP is collaborating with **Susan Kiene**, a graduate student in Psychology, and **Howard Tennen**, Professor of Community Medicine and Health Care, of the University of Connecticut Health Center, Farmington, **AIDS Project Hartford**, and **Khamis Abu-Hasaballah** of the General Clinical Research Center at UCHC on his CHIP Seed Grant *Pilot Study to Assess the Feasibility of a Daily Process Study of HIV Risk Behavior Among HIV-Positive Individuals Living in Poverty*.

5) **Blair Johnson**, Psychology, and **Leslie Snyder**, Communication Sciences, are collaborating on Study 5 of Johnson's five-year NIH/NIMH-funded study *Syntheses of HIV Risk Reduction Research*. Study 5 entails a meta-analysis of the comparative success of international mass-media campaign-based interventions for HIV prevention (p. 14).

6) **Jeffrey Fisher**, Psychology and Director of CHIP has collaborated extensively with infectious disease specialists and clinical care providers to develop a behavioral intervention that can be delivered by physicians to HIV positive individuals in the context of regular medical care appointments to reduce HIV transmission risk behaviors. CHIP affiliates involved on the project entitled "*Physician Delivered Intervention for HIV+ Individuals*," or the *Options* project, include **Deborah Cornman**, Psychology, UConn; **Frederick Altice**, M.D., infectious diseases, internal medicine, Yale; **Gerald Friedland**, M.D., internal medicine and epidemiology, Yale; **K. Rivet Amico**, Psychology, UConn; and **Jack Ross**, M.D., HIV division, Hartford Hospital, (p. 40).

7) **Jeffrey Fisher**, Psychology and Director of CHIP, is directing a large medical adherence project *Changing ART Adherence Behavior* for HIV positive patients on antiretroviral medication regimens. The project brings together co-investigators from health behavior change, medicine, clinical care, and computer technology specialties to develop, test, and evaluate an interactive, computer-delivered intervention that can be used effectively in the context of HIV positive patient's regular visits to their health clinic. Collaborators and investigators on the project include **Deborah Cornman**, CHIP, psychology; **Frederick Altice**, M.D., infectious diseases, internal medicine, Yale; **K. Rivet Amico**, psychology, CHIP; **Kevin Dieckhaus**, M.D., infectious diseases, internal medicine, UCHC; **William Fisher**, psychology and obstetrics and gynecology, University of Western Ontario; **Gerald Friedland**, M.D., internal medicine and epidemiology, Yale; **David Kenny**, psychology; and **Eugene Santos**, Computer Science and Engineering, UConn (p. 13).

8) Principal Investigators **Leslie Snyder**, communication sciences, **Jean J. Schensul**, Institute for Community Research, Hartford, CT, **Carolyn Lin**, communication sciences, and **Jeffrey D. Fisher**, and **William Barta**, psychology, have submitted a Center Grant proposal in response to an RFA released by the Centers for Disease Control in May of 2005 entitled, "*Centers of Excellence in Health Marketing and Health Communication*." This center grant proposal is for a center within CHIP dedicated to development and dissemination of cutting-edge research and theory-based health behavioral interventions that employ health communication and social marketing theory, method, and health

communication for high-risk, targeted populations. Two R01 proposals for innovative communication and social marketing strategies for interventions aimed at urban, at-risk youth were put forward with the grant, along with a proposal for a scientific administrative core to develop new, additional research in health communication and marketing. **Over 40 individuals**, including CHIP affiliates, other researchers from the University of Connecticut, the Connecticut Department of Public Health, community-based organizations (CBOs) in Connecticut, and investigators from nearby universities will serve as affiliate members if the proposed center is funded (p. 38).

**List of Affiliates of the Center for Health/HIV Intervention and Prevention**

*(Confirmed as of 6/20/05)*

**CHIP Principal Investigators** *(PIs with active or submitted grants through CHIP)*

William D. Barta, Ph.D.	Post-doctoral Fellow, CHIP, Department of Psychology, CLAS, University of Connecticut
Robert S. Broadhead, Ph.D.	Professor of Sociology, CLAS, University of Connecticut
Ross Buck, Ph.D.	Professor of Communication Sciences, CLAS, University of Connecticut
Michael M. Copenhaver, Ph.D.	Research Assistant Professor of Psychology, CLAS, University of Connecticut
Deborah H. Cornman, Ph.D. <i>Associate Director, CHIP</i>	Research Assistant Professor of Psychology, CLAS, University of Connecticut
Pamela I. Erickson, Ph.D.	Associate Professor of Anthropology and Community Medicine, CLAS, University of Connecticut
Ann M. Ferris, Ph.D.	Professor of Nutritional Sciences, CANR, University of Connecticut
Jeffrey D. Fisher, Ph.D. <i>Director, CHIP</i>	Professor of Psychology, CLAS, University of Connecticut
Blair T. Johnson, Ph.D.	Professor of Psychology, CLAS, University of Connecticut
Seth C. Kalichman, Ph.D.	Professor of Psychology, CLAS, University of Connecticut
Carol J. Lammi-Keefe, Ph.D.	Professor of Nutritional Sciences, CANR, University of Connecticut
Kerry L. Marsh, Ph.D.	Associate Professor of Psychology, CLAS, University of Connecticut
Thomas W. Miller, Ph.D., ABPP	Professor of Health Promotion & Allied Health Sciences, Allied Health, University of Connecticut



Patricia J. Neafsey, Ph.D. Professor of Nursing, (Pharmacology,) School of Nursing, University of Connecticut

Crystal L. Park, Ph.D. Associate Professor of Psychology, CLAS, University of Connecticut

Rafael Pérez-Escamilla, Ph.D. Associate Professor of Nutritional Sciences, Department of Nutritional Sciences, CANR, University of Connecticut

Linda S. Pescatello, Ph.D. Associate Professor of Allied Health Sciences, School of Allied Health, University of Connecticut

Jean J. Schensul, Ph.D. Senior Scientist and Founding Director, Institute for Community Research, Hartford, CT

Leslie B. Snyder, Ph.D. Professor of Communication Sciences, CLAS, University of Connecticut

**CHIP Research Affiliates**

*College of Liberal Arts & Sciences*

V. Bede Agocha, Ph.D. Assistant Professor of Psychology and African-American Studies Institute, University of Connecticut

David A. Atkin, Ph.D. Visiting Professor, Communication Sciences, University of Connecticut

Kirstie M. Cope-Farrar, Ph.D. Assistant Professor of Communication Sciences, University of Connecticut

Mary Crawford, Ph.D. Professor of Psychology, University of Connecticut

John F. Dovidio, Ph.D. Professor of Psychology, University of Connecticut

Kristin A. Kelly, Ph.D. Associate Professor of Political Science, University of Connecticut

Carolyn Lin, Ph.D. Professor of Communication Sciences, University of Connecticut

Stephanie Milan, Ph.D., Assistant Professor of Psychology, University of Connecticut

*College of Agriculture and Natural Resources*

Bruce A. Larson, Ph.D. Associate Professor of Agricultural and Resource Economics, University of Connecticut

*School of Allied Health*

Ronnie L. Leavitt, Ph.D. Associate Clinical Professor of Physical Therapy and Medical Anthropology, University of Connecticut

Pouran Faghri, M.D., M.S., F.A.C.S.M. Associate Professor of Health Promotion & Allied Health Sciences, University of Connecticut

Narasimhan Srinivasan, Ph.D.	<i>School of Business</i> Associate Professor of Marketing, University of Connecticut
Ann A. O'Connell, Ph.D.	<i>Neag School of Education</i> Associate Professor of Educational Psychology, University of Connecticut
Douglas K. Hartman, Ph.D.	Associate Professor of Curriculum and Instruction, University of Connecticut
Eugene Santos, Jr., Ph.D.	<i>School of Engineering</i> Associate Professor of Computer Science and Engineering, University of Connecticut
Preston A. Britner, Ph.D.	<i>School of Family Studies</i> Associate Professor of Family Studies, University of Connecticut
James M. O'Neil, Ph.D.	Professor of Family Studies and Educational Psychology, University of Connecticut
Elizabeth H. Anderson, Ph.D.	<i>School of Nursing</i> Associate Professor of Nursing, University of Connecticut
Deborah A. Shelton, Ph.D. R.N., C.N.A., B.C.	Associate Professor of Nursing, University of Connecticut
Martin Bloom, Ph.D.	<i>School of Social Work</i> Professor of Social Work, University of Connecticut
Barbara A. Dicks, Ph.D.	Associate Professor of Social Work, University of Connecticut
Michie N. Hesselbrock, Ph.D.	Professor of Social Work, University of Connecticut
Cheryl A. Parks, Ph.D.	Associate Professor of Social Work, University of Connecticut
Mark D. Litt, Ph.D.	<i>UConn Health Center, School of Dental Medicine</i> Professor of Behavior Sciences and Community Health, UCHC, University of Connecticut
Julie A. Wagner, Ph.D.	Assistant Professor of Behavior Sciences and Community Health, UCHC, University of Connecticut
Thomas F. Babor, Ph.D., M.D.	<i>UConn Health Center, School of Medicine</i> Professor and Chair, Department of Community Medicine and Health Care, Alcohol Research Center, UCHC, University of Connecticut

Lance O. Bauer, Ph.D.	Professor of Psychiatry, Associate Scientific Director, Alcohol Research Center, UCHC, University of Connecticut
Kevin D. Dieckhaus, M.D.	Assistant Professor of Infectious Diseases, UCHC, University of Connecticut
Bruce E. Gould, M.D.	Associate Dean for Primary Care, UCHC, University of Connecticut
David I. Gregorio, Ph.D., M.S.	Associate Professor of Community Medicine and Health Care, Director, Graduate Program in Public Health, UCHC, University of Connecticut
Victor M. Hesselbrock, Ph.D.	Professor of Psychiatry, Associate Chair for Research, and Director, Alcohol Research Center, School of Medicine, UCHC, University of Connecticut
Ronald M. Kadden, Ph.D.	Professor of Psychiatry, Alcohol Research Center, UCHC, University of Connecticut
Yifrah Kaminer, M.D., M.B.A.	Professor of Psychiatry, Alcohol Research Center, UCHC, University of Connecticut
Henry Kranzler, M.D., M.B.A.	Professor of Psychiatry, Assistant Dean for Clinical Research, UCHC, University of Connecticut
Zita Lazzarini, J.D., M.P.H.	Associate Professor and Director, Division of Medical Humanities, Health Law and Ethics, UCHC, University of Connecticut
Nancy M. Petry, Ph.D.	Professor of Psychiatry, Alcohol Research Center, UCHC, University of Connecticut
T.V. Rajan, M.D.	Professor of Pathology and Immunology, UCHC, University of Connecticut
Juan C. Salazar, M.D., M.P.H.	Assistant Professor of Pediatrics, UCHC, University of Connecticut; Head, Pediatric HIV/AIDS, Connecticut Children's Medical Center, Hartford
Stephen L. Schensul, Ph.D.	Associate Professor of Community Medicine and Anthropology, Center for International Community Health Studies, UCHC, University of Connecticut
John D. Shanley, M.D.	Professor of Microbiology and Immunology, Director of Internal Medicine, Department of Infectious Diseases, School of Medicine, UCHC, University of Connecticut
Howard Tennen, Ph.D.	Professor of Community Medicine, Department of Community Medicine and Health Care, Alcohol Research Center, UCHC, University of Connecticut

Keith vom Eigen, M.D., Ph.D., M.P.H. Assistant Professor, Internal Medicine, School of Medicine, UCHC, University of Connecticut

*University of Connecticut, CHIP*

K. Rivet Amico, Ph.D. Consultant and Affiliate, CHIP

Paul A. Shuper, Ph.D. Post-Doctoral Fellow and Affiliate, CHIP

Natalie D. Smoak, Ph.D. Post-Doctoral Fellow and Affiliate, CHIP

*Yale University – New Haven, CT*

Frederick L. Altice, M.D. Associate Professor of Medicine; Director, HIV in Prisons Program, School of Medicine, Yale University

Gerald H. Friedland, M.D. Professor of Medicine and Epidemiology, Director, AIDS Program, Yale University

Michael J. Kozal, M.D. Assistant Professor, School of Medicine, Yale University

Sheryl LaCoursiere, Ph.D. R.N. Post-Doctoral Fellow, Center for Excellence in Chronic Illness Care, School of Nursing, Yale University

*Brown University – Providence, RI*

Cynthia Rosengard, Ph.D. Assistant Professor of Medicine (Research), Biomedicine, Brown University

*University of Colorado – Boulder, CO*

Angela Bryan, Ph.D. Assistant Professor of Psychology, Behavioral Science Institute, University of Colorado

*University of Western Ontario – London, Ontario, Canada*

William A. Fisher, Ph.D. Professor of Psychology and Obstetrics and Gynecology, University of Western Ontario

*Southern Illinois University – Carbondale, IL*

Josephine D. Korchmaros, Ph.D. Assistant Professor of Psychology, Southern Illinois University

*State University of New York (SUNY), Purchase, NY*

Anthony Lemieux, Ph.D. Assistant Professor of Psychology, SUNY, Purchase

*Eastern Connecticut State University*

Carlos A. Escoto, Ph.D. Assistant Professor of Psychology, ECSU

Geeta Pfau, Ph.D. Assistant Director of Health Services, ECSU

## **12. New CHIP Research Interest Groups**

On December 1, 2004, CHIP held its first Site Visit and Internal Review by the University of Connecticut Vice Provost for Research. The meeting, which brought a large number of CHIP affiliates together to review past and present accomplishments of the Center, prompted the formation of five major research interest groups in key health domains where there is significant research expertise at the University of Connecticut. In the early months of 2005, these research interest groups met for the first time and began to set goals for collaboration on research development for the coming year. The five research interest groups are: Cancer Prevention, Alcohol and Drug Abuse Prevention, Medical and Health Disparities, Diabetes Management, and Health Communication/Social Marketing/Information Technology. In the coming year these groups will meet periodically to identify opportunities to focus knowledge, talent, and collective resources to pursue research funding for projects that would be difficult to pursue individually.

### **Cancer Prevention Group**

A cancer prevention partnership is steadily developing between the Carole and Ray Neag Comprehensive Cancer Center at the University of Connecticut Health Center and CHIP, with discussions and resource development underway. An initial focus will begin with collaborations for prevention of colorectal cancer and will quickly expand from there. Drs. Peter Deckers and Joel Levine of the University of Connecticut Health Center and Dr. Jeffrey Fisher, Director of CHIP, with support from the Neag Cancer Center, are laying plans for the hiring a senior faculty member in cancer prevention to anchor the initiative. This individual, to be identified through an aggressive search, will be an internationally recognized investigator in cancer prevention. The new position will be based both at CHIP/Storrs and at the Health Center and will direct collaborative endeavors between the two campuses. This initiative capitalizes on existing, extraordinary strengths at the University of Connecticut in both basic medical research on cancer (UCHC) and health behavior change (CHIP) that can be brought to bear on development of innovative new approaches to cancer prevention intervention research.

UConn faculty participating in early formation of the cancer prevention interest group include Jeffrey Fisher, Psychology, Director of CHIP; Joel Levine, MD, School of Medicine, UCHC; David Gregorio, Community Medicine and Health Care, School of Medicine, UCHC; Denis Coble, CytoTechnology Program, School of Allied Health; Deborah Cornman, Psychology, Associate Director of CHIP; Rebecca Ferrer, Graduate Student, Psychology, CHIP; Amy Kenefick, School of Nursing; Susan Kiene, Graduate Student, Psychology, CHIP; Sheryl LaCoursiere, Center for Excellence in Chronic Illness Care, Yale University School of Nursing; Crystal L. Park, Psychology; David Portnoy, Carolyn Runiewicz, MD, UCHC; Paul Shuper, Post-doctoral Fellow, Psychology, CHIP; and Keith vom Eigen, School of Medicine, UCHC.

### **Alcohol and Drug Abuse Prevention Group**

A kick-off forum for the Alcohol and Drug Abuse Prevention group was held at CHIP on Friday, May 13, 2005. The meeting entitled "*Alcohol on Campus and in the Community: A Dialogue on Use & Abuse, Lapse & Relapse,*" was conceived as a day of programming

to bring together alcohol and drug researchers, educators, health specialists in addiction, treatment/recovery, and prevention, and others from the Alcohol Research Center at the University of Connecticut Health Center, from CHIP, as well as from the greater Connecticut health community, to share findings and information about alcohol and drug research current underway at the University of Connecticut.

Keynote speaker Dr. Ralph Hingson from the NIAAA attended and provided remarks on the epidemiology of alcohol abuse in the US, particularly among young adults, and discussed directions and priorities for alcohol research funding by NIAAA in the coming year. The meeting was convened by Drs. V. Bede Agocha and William Barta of CHIP.

Goals for the forum were to: 1) build and identify the growing alcohol research community at University of Connecticut, 2) share information about current and planned projects, 3) explore opportunities for coordination and collaboration among investigators, 4) invigorate partnerships between university administrators, researchers, practitioners, and specialists working on alcohol related problems, and 5) develop strategies for producing new, collaborative proposals for external funding in drug and alcohol abuse prevention research.

Key among the next steps identified at the meeting included the need for creation of an information and resource sharing network (with supportive technology & infrastructure, possibly via list-serve), to link participating research teams, and the need for next follow-up session in the fall.

UConn faculty and staff participating in the alcohol and drug research interest group include: V. Bede Agocha, Psychology, CHIP; Thomas Babor, ARC, UCHC; William Barta, Psychology, CHIP; Sherri Bassi, School of Nursing, UConn; Michael Copenhaver, Psychology, CHIP; Michie Hesselbrock, School of Social Work, UConn; Victor Hesselbrock, ARC, UCHC; Yifrah Kaminer, M.D., ARC, UCHC; Henry R. Kranzler, M.D., ARC, UCHC; Carolyn Lin, Communication Sciences, UConn; Patricia J. Neafsey, School of Nursing, UConn; Cheryl Parks, School of Social Work, UConn; Nancy Petry, M.D., ARC, UCHC; Geeta L. Pfau, Assistant Director of Health Services, Eastern Connecticut state University; Jean J. Schensul, Senior Scientist and Founding Director, Institute for Community Research (ICR), Hartford; Leslie Snyder, Communication Sciences, UConn; Tom Szigethy, Office of Alcohol and Other Drugs, Dean of Students Office, UConn.

### **Health Disparities Group**

Formation of a research interest group on medical and health disparities is underway at CHIP, with a first group meeting planned for September, 2005, to be headed by Professor John Dovidio of the Department of Psychology. CHIP has invested in the formation of this interest group that will examine ethnic and racial disparities in health and health care, particularly with respect to diabetes, cardiovascular disease, and cancer. The purpose of the interest group will be to explore common interests, create interdisciplinary interaction stimulated by presentations by invited national-level speakers, and to identify productive areas for collaborative new grant writing and scholarship.

### **Diabetes Management Group**

Several key CHIP investigators and affiliates have research in development for health behavior change in the area of diabetes management. In the coming year a research interest group will be formed at CHIP to pursue new research initiatives in the areas of nutrition, exercise, and medical adherence for diabetes management.

### **Health Communication, Social Marketing, and Information Technology group**

An example of how the new interest groups are able to foster and catalyze new research was demonstrated in May-June, 2005, by the Health Communication, Social Marketing, and Information Technology interest group at CHIP. On May 2, 2005 the federal Department of Health and Human Services (DHHS) and Centers for Disease Control (CDC) issued a request for proposals for a one-time initiative entitled “Centers of Excellence in Health Marketing and Health Communication.” The call was for center grant proposals, up to three of which could potentially be funded for three years each, at approximately \$1 million per center per year. The deadline for proposal submissions was set for June 17, 2005, just seven weeks from release of the program announcement.

On May 10<sup>th</sup> CHIP was put in touch with William Gerrish, Director of Communications for the State of Connecticut Department of Public Health, by way of the School of Business at the University of Connecticut. The CT DoPH was interested in seeing UConn respond to the RFP to jumpstart a health communication and marketing initiative in the State and was looking for partners. CHIP sent out an announcement to its 70+ research affiliates to identify individuals interested in pursuing the grant. Over 25 affiliates and researchers responded to the announcement. A meeting was set for the following Thursday, May 19<sup>th</sup> to review R01 grant proposals in preparation, two of which would need to be completed and submitted as full R01 proposals along with the proposal for a scientific core, mission, and administrative structure for the new proposed center. Leslie B. Snyder, Professor of Communication Sciences at UConn stepped forward to head the project as Principal Investigator for the Center proposal, and five proposals under development were submitted for consideration in advance of the meeting. At the meeting three R01 proposals were selected to go forward with the grant, and teams were formed to bring produce each of the proposals.

In the remaining four weeks, two of the three R01 proposals were completed, as well as the core proposal for the proposed new Health Communication and Social Marketing Center (conceived as a “center-within-a-center”) at CHIP. The proposals were submitted on May 16, 2005. The R01 proposals submitted with this Center Grant included: “*A Site-based Social Marketing Intervention to Prevent Party Drug Use with Urban Youth,*” Principal Investigator, Jean J. Schensul, Ph.D., Co-Principal Investigator, Sarah Diamond, (ICR), and “*HIV Prevention Computer Game for Urban Minority Emerging Adults,*” Principal Investigator: Leslie Snyder, Co-Principal Investigators William D. Barta, Ph.D., Psychology, Carolyn Lin, Ph.D., Communication Sciences, and Cynthia Rosengard, Assistant Professor of Psychology, Brown University; Co-Investigators Kirstie Cope-Ferrar and Karen Cornetto, of Communication Sciences, and Juan Salazar, MD, Pediatric Infectious Diseases, School of Medicine UCHC; and

Collaborators, Geeta Pfau, Ph.D. Assistant Director of Health Services, Eastern Connecticut State University, Zoe Strickler, Coordinator of Multidisciplinary Research, CHIP, and Nilda Fernandez, Community Health & Family Social Work, School of Medicine, UCHC, and Connecticut Children's Medical Center.

The response by CHIP affiliates to this fast, and very complex, funding opportunity was tremendous. Ultimately, over 40 individuals from the University of Connecticut, the Connecticut Department of Public Health, community-based organizations (CBOs) in Connecticut, and investigators from nearby universities stepped forward to express interest in the research interest group and to contribute to development of the grant proposals. This proposal for a center grant is the first of its kind at CHIP, and regardless of the funding outcome it serves as a learning opportunity and model for future successes.

**Members of the Health Communication, Social Marketing and Information Technology Interest Group:**

Rivet K. Amico, Department of Psychology, CHIP, UConn  
Thomas Babor, Community Medicine and Health Care, Alcohol Research Center, UCHC  
William D. Barta, Post-doctoral Fellow, Department of Psychology, CHIP  
Susan Beeman, Assistant Educator in Residence, Nutritional Sciences, CANR, UConn  
Brian Bemis, Information Technology Specialist, CHIP, UConn  
Ross Buck, Professor, Communication Sciences, UConn  
Kirstie Cope-Ferrar, Assistant Professor, Department of Communication Sciences, UConn  
Michael M. Copenhaver, Assistant Research Professor, Department of Psychology, UConn  
Karen Cornetto, Assistant Professor, Department of Communication Sciences, UConn  
Dipak Dey, Professor, and Head, Department of Statistics, UConn  
Sarah Diamond, Research Associate, Institute for Community Research, Hartford, CT  
Pamela I. Erickson, Professor, Department of Anthropology, UConn  
Jeffrey D. Fisher, Professor, Department of Psychology, UConn  
Nilda Fernandez, Community Health & Family Social Work, School of Medicine, UCHC  
Ann Ferris, Ph.D., Professor, Nutritional Sciences, UConn  
J. Robert Galvin, MD, Commissioner, State of Connecticut Dept. of Public Health  
William Gerrish, Director of Communications, State of Connecticut Dept. of Public Health  
Douglas Hartman, Associate Professor, Neag School of Education, UConn  
Randall Hoyt, Assistant Professor, Visual Communication Design, Fine Arts, UConn  
Blair T. Johnson, Professor, Department of Psychology, UConn  
Dave Kenny, Professor, Department of Psychology  
Susan Kiene, Graduate Student, Department of Psychology, CHIP, UConn  
Jeffrey Kramer, Center for Public Health and Health Policy, School of Business, UConn  
Marina Krcmar, Associate Professor, Communications Sciences, UConn  
Sheryl LaCoursiere, Post-Doctoral Fellow, School of Nursing, Yale University  
Carolyn Lin, Professor, Department of Communication Sciences, UConn  
Kerry L. Marsh, Professor, Department of Psychology, UConn  
Deborah McDonald, Professor, School of Nursing, UConn  
Thomas Miller, Professor, Health Promotion and Allied Health, School of Allied Health,



Patricia J. Neafsey, Professor, Pharmacology, School of Nursing  
Ann O' Connell, Associate Professor, Ed. Psychology, Neag School of Education, UConn  
Rafael Pérez-Escamilla, Associate Professor, Department of Nutritional Sciences, UConn  
Linda S. Pescatello, Associate Professor, Health Promotion and Allied Health, UConn  
Geeta Pfau, Assistant Director of Health Services, Eastern CT State University  
Michelle Pierce, Assistant Educator in Residence, Nutritional Sciences, UConn  
David Portnoy, Graduate Student, Department of Psychology, CHIP, UConn  
Cynthia Rosengard, Assistant Professor, Psychology, School of Medicine, Brown University  
Juan Salazar, MD, Pediatric Infectious Diseases, School of Medicine, UCHC  
Eugene Santos, Jr., Professor, Department of Engineering and Computer Sciences, UConn  
Jean J. Schensul, Senior Scientist and Founding Director, Institute for Community Research, Hartford, CT  
Leslie B. Snyder, Professor, Department of Communication Sciences, UConn  
Zoe Strickler, Coordinator of Multidisciplinary Research, CHIP, UConn  
Natalie Smoak, Post-doctoral Fellow, Psychology, CHIP, UConn  
Narasimhan Srinivasan, Associate Professor of Marketing, School of Business, UConn  
Eileen Storey, Professor, Occupational and Environmental Medicine, UCHC  
Christine Unson, Assistant Professor, Communication Western CT State University  
Art Vanlear, Professor, Department of Communication Sciences, UConn

### **13. Dissemination of CHIP Theory, Interventions, and Technology**

In FY05 CHIP achieved tremendous success in disseminating cutting-edge, theory-based intervention technology developed by CHIP investigators to health organizations nationally and globally working in communities with high rates of HIV and other at-risk populations. These interventions include 1) the *Options/Opciones* physician-delivered HIV prevention intervention, developed under the direction of Jeffrey Fisher, Director of CHIP, 2) the *Healthy Relationships* HIV risk prevention intervention for HIV positive individuals, developed by Seth Kalichman, Psychology, 3) the *Peer-Driven Intervention* (PDI) model of HIV risk prevention for intravenous drug users, developed by Robert Broadhead, Sociology, and 4) *Preventing Medicine Conflicts*, developed by Dr. Patricia Neafsey, School of Nursing, and Zoe Strickler, CHIP.

**Options/Opciones Project:** Outreach efforts at CHIP and inquiries from health organizations have lead to important agreements in the United States and South Africa to deploy the CHIP-developed *Options/Opciones Project* in locations where HIV infection is a serious threat to the population. *Options* is a theory-based, physician-delivered, HIV prevention intervention for HIV positive patients developed by a team under the direction of CHIP Director, Jeffrey D. Fisher, originally funded by an R01 grant from the NIH/NIMH. The *Options* intervention was designed to be adopted relatively easily by public health clinics serving communities with high rates of HIV. *Options* is an important innovation in that the majority of HIV prevention efforts to date have focused on risk prevention for individuals not infected with HIV. *Options* is directed to HIV seropositives

who may transmit HIV infection to others in the absence of effective prevention interventions.

Two years ago CHIP began work on a two-year \$320,000 agreement with the New York State Department of Health AIDS Institute to deploy *Options/Opciones* in several key sites in the State of New York under the direction of CHIP investigator Deborah Cornman. Dr. Cornman has since conducted extensive training sessions with physicians in New York City and developed video-based training materials to be distributed to physicians in rural areas throughout New York State. To enhance this outreach, Dr. Cornman developed, and was awarded, an NIMH/SBIR new technologies grant to develop an Internet-based program to train physicians in the *Options* HIV prevention counseling approach. Recently the Health Research Services Administration (HRSA) has released an RFP for competitive proposals for 15 hospitals in the US to implement *Options*.

CHIP has also entered into a partnership with the Nelson Mandela School of Medicine in Durban, South Africa, to pilot use of a modified version of *Options* with populations in South Africa under the direction of **Jeffrey D. Fisher**, and with the assistance of **Deborah Cornman**, graduate student **Susan Keine**, post-doctoral fellow, **Paul Shuper**, and **Sarah Christie**, program staff, of CHIP. In addition, CHIP has received inquiries from the Veterans Administration, the Department of Defense, and the Centers for Disease Control (CDC) about dissemination of *Options*. CHIP is currently exploring the possibility of developing agreements with these agencies.

**Healthy Relationships:** *Healthy Relationships*, is an intervention developed by professor **Seth Kalichman** of CHIP, that was accepted over a year ago by the Centers for Disease Control (CDC) in Atlanta for inclusion in its Replicating Effective Programs (REP) initiative. In FY05, following successful evaluation in the REP program, *Healthy Relationships* moved into the CDC's DEBI program (Distribution of Effective Interventions). The REP and DEBI initiatives are part of a CDC dissemination project that identifies HIV/AIDS prevention interventions that have demonstrated evidence of effectiveness in the health literature. CDC then funds replication studies to verify the effectiveness across multiple sites. The REP project takes proven interventions and packages them in a tool kit for distribution, and once the effectiveness has been validated, CDC moves the intervention into DEBI, where intervention training materials are prepared for distribution and adoption by health organizations nationwide.

*Healthy Relationships* is a five-session, small-group intervention for men and women living with HIV/AIDS to reduce transmission to their intimate partners. It is based on Social Cognitive Theory and focuses on developing skills and positive expectations about HIV prevention, and building self-efficacy to enact protective behavior through modeling and practicing of new skills. *Healthy Relationships* is one of 13 approved CDC/REP interventions and in its final form it is the product of extensive collaboration among the researchers who originally developed and evaluated the intervention and community-based agencies who field tested the materials.

**Peer-Driven Intervention:** During the 1990s, **Robert Broadhead**, Professor of sociology, pioneered his *Peer-Driven Intervention* (PDI) model of HIV prevention to combat the spread of HIV among injection drug users (IDUs). The effectiveness of the model, which recruits and educates peer IDUs to deliver HIV prevention information and skills to members of extremely difficult-to-reach IDU populations, was demonstrated in a multi-site study from 1994-1998 in Eastern Connecticut, and again in Russia from 1996-1998. In May of 2004, Dr. Broadhead received notice that he was awarded a prestigious 5-year “K02” independent scientist award from NIH/NIDA to extend this work globally (p.11), beginning in July of 2004. In the context of the award Dr. Broadhead will collaborate with international researchers and public health organizations in Russia, Thailand, Vietnam, China, and the US to implement an array of initiatives to further test and refine PDI. While the award funds continuing investigation and improvement of PDI, including detailed ethnographic research to adapt the model to the unique social structures of localized IDU communities in diverse international environments, it makes possible extensive implementation and technology transfer of PDI to areas of the globe where both sociological research method and public health intervention are underdeveloped.

**Preventing Medicine Conflicts:** *Preventing Medicine Conflicts* is an interactive, computer intervention to reduce adverse self-medication practices in older adults with hypertension. The intervention, which features an appealing touch-screen interface and animations of basic pharmacological interactions among prescription medications, over-the-counter agents, and alcohol, was developed for the psychomotor skills, health literacy, and learning styles of adults aged 65 and older. In a rigorous 6-week clinical trial, older adult users of the program demonstrated increased knowledge and self-efficacy concerning potential adverse self-medication practices and reported fewer adverse medication behaviors compared to older adults receiving conventional care. In FY05 the *Preventing Medicine Conflicts* intervention has been implemented by visiting Nurse Associations (VNA) serving seniors in nine states (CA, GA, KY, MA, ND, NV, PA, NY). The investigators are currently partnering with New England Homecare, Inc. to conduct a long-term study of the effectiveness of the PEP in improving medication adherence in older adults with hypertension.

#### *CHIP Dissemination*

As a means to increase awareness of interventions developed at CHIP and to encourage adoption of CHIP-developed technology CHIP has recently created a series of brochures on several of its interventions for distribution to health agencies who may be considering adoption of CHIP-developed behavior change interventions and technology with their populations. The CHIP web site is also being reorganized to facilitate dissemination of research measures and interventions developed at CHIP to individuals, public health organizations, and community-based organizations working around the globe.

## 14. CHIP Scholarly Publications and Presentations

The following scholarly publications and presentations were published, or delivered, by CHIP principal investigators and their students, CHIP research staff, and investigators receiving CHIP research development funds for the fiscal years June 30, 2004 – June 30, 2005. Articles are listed in alphabetical order by CHIP investigator. CHIP Affiliates, students, and CHIP research personnel are indicated in bold print. CHIP graduate students are indicated with a (g). Principal Investigators included in this list are: William D. Barta, Robert S. Broadhead, Michael M. Copenhaver, Deborah H. Cornman, Pamela I. Erickson, Jeffrey D. Fisher, William A. Fisher, Blair T. Johnson, Seth C. Kalichman, Carol J. Lammi-Keefe, Kerry L. Marsh, Thomas W. Miller, Patricia J. Neafsey, Ann O’Connell, Crystal L. Park, Rafael Pérez-Escamilla, Linda S. Pescatello, Natalie D. Smoak, Leslie B. Snyder.

*Only publications and presentations by CHIP Principal Investigators and their immediate staff are included in this list. A list that included publications by all CHIP affiliates would be much longer.*

**June 30, 2004 – June 30, 2005**

### Scholarly Books Edited

Albarracín, D., **Johnson, B. T.**, & Zanna, M. P. (Eds.) (2005). *The Handbook of Attitudes*. Mahwah, NJ: Erlbaum.

**Kalichman, S.C.** (Eds.). (2005). *Positive Prevention: Sourcebook for HIV Risk Reduction with People Living with HIV/AIDS*. Springer/Kluwer Publishing.

**Kalichman, S.C.** (Eds.). (2005). *Positive Prevention: Reducing HIV Transmission Among People Living with HIV/AIDS*. New York: Kluwer.

Heft, H., & **Marsh, K. L.** (Eds.). (2005). *Studies in Perception and Action VIII*. Mahwah, NJ: Lawrence Erlbaum Associates.

### Scholarly Book Chapters

**Kiene, S.M., Fisher, J.D., & Fisher, W.A.** (2005). Interventions in clinical settings. In **S. C. Kalichman** (Ed.), *Positive Prevention: Reducing HIV Transmission among People Living with HIV/AIDS*. New York: Kluwer.

**Kiene, S.M (G), Fisher, J.D. & Fisher, W.A.** (2005). Linking prevention with care: HIV risk reduction interventions in clinical settings for persons living with HIV. In **S.C. Kalichman**, (Ed.), *Positive Prevention: Reducing HIV Transmission among People Living with HIV-AIDS*. (pp.219-244). New York: Kluwer Academic/Plenum Publishers.

Albarracín, D., **Johnson, B. T.**, & Zanna, M. P. (2005). Preface. In D. Albarracín, **B. T. Johnson**, & M. P. Zanna (Eds.), *The Handbook of Attitudes* (pp. vii-ix). Mahwah, NJ: Erlbaum.

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- Kalichman, S.C.** & Malow, R. (2004). Overview: Adherence to antiretroviral therapies (pp. 11-17). In J. Lawrence, (Ed.), *Medication Adherence in HIV/AIDS*. New York: Mary Ann Liebert.
- Miller, T.W.** (2004) Therapeutic exercise program design considerations: "Putting it all together." In J. Nyland (Ed.), *Critical Decisions in Therapeutic Exercise Planning*. New Jersey: Prentice-Hall Publishers.
- Miller, T. W.** & **Jarrin, O. (g)** (2005) Telemedicine applications for ADHD in underserved populations. In F. Columbus, (Ed.) *Progress in Attention Deficit/Hyperactivity Disorder Research*. New York: Nova Science Press.
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- Schilling, E. J., & **Park, C. L.** (2005). Effects of stress, coping, and other psychological factors on the health of individuals with diabetes. In F. Columbus (Ed.), *Psychology of Coping*, (pp. 211-234). Hauppauge, NY: Nova Science Publishers.
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- Pérez-Escamilla, R.** (2005) Poverty, acculturation, and nutrition among Latinos. In S. Oboler & D.J. González, (Eds), *Encyclopedia of Latinos and Latinas in the United States*. New York: Oxford University Press.
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### Full-length articles in refereed journals

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- Albarracín, D., Kumkale, G. T., & **Johnson, B. T.** (2004). Influences of social power and normative support on condom use decisions: A research synthesis. *AIDS Care, 16*, 700-723.
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- Neafsey, P.J.** (2005). Ketolides: New antimicrobials for community-acquired pneumonia, *Home Healthcare Nurse, 23*(3), 141-144.
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**Conference proceedings and presentations (short paper, abstract or poster)**

- Barta, W. D., Kiene, S. M., Tennen, H., & Abu-Hasaballah, K.** (April, 2005). *Feasibility of interactive voice response technology among profoundly economically disadvantaged drinkers living with HIV*. Poster session to be presented at the annual meeting of the Society of Behavioral Medicine, Boston, MA.
- Barta, W. D., & Kiene, S. M.** (April, 2005). *Efficacy of a computer-delivered condom use intervention*. Oral presentation to be presented at the 7th International AIDS Impact Conference, Cape Town, South Africa.
- Broadhead, R.,** Volkanevsky, V., Rudanova, T., Mamina, A., Litchenkova, S. I., Ryabkova M. and Sher, E. (2004, May). *Comparing a standard to a simplified peer driven intervention for IDUs: first operating year of a field experiment in Bragino and Rybinsk, Russia*. 12<sup>th</sup> International Conference on AIDS, Cancer and Related Problems, St. Petersburg, Russia.
- Broadhead, R.,** Majo, X., Colom, J. (June, 2004). *The impact of the closure of a major open drug scene (Can Tunis) in Barcelona, Spain*. NIDA International Research Forum: Progress Through Collaboration, in San Juan, Puerto Rico “”
- Broadhead, R.,** Volkanevsky, V., Rudanova, A.M., Litchenkova, S.I., Ryabkova, M. & Sher, E. *Comparing a standard to a simplified peer driven intervention for IDUs: first operating year of a field experiment in Bragino and Rybinsk, Russia*.
- Broadhead, R.,** van Hulst, Y., Borch, C. Altice, F. (July, 2004). *Using respondent-driven sampling over conventional HIV counseling and testing services to reach injection drug users*. World AIDS Conference in Bangkok, Thailand.
- Broadhead, R.,** Minh, N.H., Hoang, T. V., Kane, T., Hammett, T., Loi, V. (July, 2004). *Comparing peer-driven interventions (PDIs) in three Vietnamese cities to combat HIV among IDUs*. World AIDS Conference in Bangkok, Thailand.
- Broadhead, R.,** Volkanevsky, V., Sergeyev, B., van Hulst, Y., Heckathorn, D.D. (July, 2004). *Comparing a standard to a simplified peer-driven intervention for IDUs in Russia*. World AIDS Conference in Bangkok, Thailand.
- Broadhead, R.,** Volkanevsky, V., Rudanova, T.S., Ryabkova, M., Borch, C., Sher, E., van Hulst, Y. (April, 2005). *The cost, effectiveness and ethics of paying for active drug users' participation: a comparison in Russia of three HIV field interventions*. 16th International Conference on the Reduction of Drug Related Harm, Belfast, North Ireland.
- Lee, I.C. & Copenhaver, M.** (2005). *HIV risk reduction can be integrated into substance abuse treatment*. Oral presentation (by Copenhaver) at the annual conference of the College on Problems of Drug Dependence (CPDD). Orlando, FL.
- Copenhaver, M.,** Lee, I.C., **Harman, J. (g), Johnson, B.T., & Carey, M.** (2005). *Specifying the key components of HIV risk reduction interventions targeting IDUs*. Poster presentation at the annual conference of the College on Problems of Drug Dependence (CPDD), Orlando, FL.

- Fisher, J.D., Fisher, W.A., Cornman, D.H.(p), Amico, K.R.(p), Friedland, G.** (2004, July). *Effects of a clinician-initiated HIV prevention intervention among HIV+ patients.* Poster presentation at the XV International AIDS Conference, Bangkok, Thailand.
- Barta, W.(p), Kiene, S. M.(g), & Fisher, J. D.** (February, 2004). *A computerized, individually tailored, condom use intervention based upon the IMB model of health behavior change.* Poster abstract published in the program of annual meeting of the Society for Personality and Social Psychology, Austin, TX. [Omitted from last year's report].
- Christie, S., Kiene, S. M.(g), Fisher, J.D., Friedland, G., Giddy, J., Pillay, S., Cele, M., Cornman, D.(p).** (May, 2004). *Integrating prevention into HIV clinical care in urban South Africa: Challenges and feasibility.* Paper presented at the 2<sup>nd</sup> African Conference on Social Aspects of HIV/AIDS Research, Cape Town, South Africa. [Omitted from last year's report].
- Kiene, S.M., (g) Fisher, J.D., Cornman, D.H., Friedland, G., Moll, A.** (2004, July). *Challenges of and possibilities for HIV prevention in the clinical care setting in KwaZulu-Natal, South Africa.* Oral presentation at the XV International AIDS Conference, Bangkok, Thailand.
- Kiene, S. M.(g), Barta, W. D.(p), & Fisher, J. D.** (September, 2004). *Preliminary tests of an individually-tailored computer-delivered condom use intervention for college students.* Poster session presented at the annual meeting of the New England Social Psychological Association, Storrs, CT.
- Shuper, P. A., Fisher, J. D., Cornman, D. H., Amico, K. R., Fisher, W. A., Barta, W., Lemieux, A., & Redding, C. G.** (December, 2004). *Using computer-based interventions to increase ART adherence among people living with HIV: An application of the Information-Motivation-Behavioral Skills Model.* Paper presented at the Third Annual Elements of Success Conference in Dallas, TX.
- Osborn, C. Y. (g) & Fisher, J. D.** (2005, June). *The IMB Model of Health Behavior Change in diabetes education.* Abstract published in the 65th Scientific Sessions American Diabetes Association Abstract Book, the June supplement to the JournalDiabetes (#2345-PO), San Diego, CA.
- Kiene, S. M.(g), Fisher, J. D., Christie, S., Cornman, D., Pillay, S., Cele, M., Shuper, P.(p), Friedland, G., & Giddy, J.** (April, 2005). *Formative research for the development of a clinic-based HIV risk reduction intervention for HIV+ individuals in Durban, South Africa.* Oral presentation at the 7th International AIDS IMPACT Conference: Biopsychosocial Aspects of HIV Infection, Cape Town, South Africa.
- Fisher, J.D., & Copenhaver, M.M.** (2005, June). *Experts outline ways to change the decade-long yearly rate of 40,000 new HIV infections in the U.S.* Poster presented at the College on Problems of Drug Dependence (CPDD), Orlando, FL.
- Fisher, J.D., Fisher, W.A., Cornman, D.H., Amico, K.R., Bryan, A., Friedland, G.H.** (2005, July). *Effects of a Provider-Initiated HIV Prevention Intervention Among*

*HIV+ Patients*. Poster presentation at the 3rd IAS Conference on HIV Pathogenesis and Treatment, Rio de Janeiro, Brazil.

**Fisher, J.D. & Copenhaver, M.** (2005). *Experts outline ways to improve the trend of 40,000 new infections per year in the U.S.* Poster presentation at the annual conference of the College on Problems of Drug Dependence (CPDD), Orlando, FL.

**Fisher, W.A.** (October, 2004). *Sexual function in the ageing male: MALES 2004* World Association of Family Medicine, Orlando, Florida,.

**Fisher, W.A.** (October, 2004). *What men with ED want, and why they aren't getting it.* World Association of Family Medicine, Orlando, Florida.

**Fisher, W.A.** (December, 2004). *Sexual ecology of men with ED: Timing, periodicity and predictability of sexual activity of men in the MALES 2004 study.* European Society of Sexual Medicine, London, England.

**Fisher, W.A.** (December, 2004). *Patient, partner, and physician communication about erectile dysfunction—the patient perspective. Initial results of the "Strike Up a Conversation" research program.* European Society of Sexual Medicine, London, England.

**Boynton, M. B.,(g) Johnson, B. T., & Hebert, K.(u)** (2005, May). *The past matters: Using the theory of planned behavior to examine the influence of past behavior on future smoking behavior.* Paper presented at the annual meeting of the Midwestern Psychological Association, Chicago, IL.

**Harman, J. J.,(g) Johnson, B. T. & Marsh, K. L.** (2005, January). *Parental investment theory and attitudes towards condoms in intimate relationships: Gender differences in response to relationship threat.* Paper presented at the Society for Personality and Social Psychology, New Orleans, LA.

Smith-McLallen, A.,(g) & **Johnson, B. T.** (2005, January). *Argument strength, desirability, and likelihood: Stretching the limits of credulity.* Poster session at the 6th annual meeting of the Society for Personality and Social Psychology, New Orleans, LA.

**Harman, J. J.,(g), Johnson, B. T., & Marsh, K. L.** (2004, October). *Relationship closeness under threat: Gender differences in attitudes towards condoms.* Paper presented at the Society for Experimental and Social Psychology, Ft. Worth, TX.

**Marsh, K. L., & Johnson, B. T.** (2004, June). *The role of implicit attitudes in relatively complex [potentially deliberate] behaviors.* Paper presented in G. Haddock, G. Maio, P. Briñol, & R. E. Petty (Organizers), *Conscious and non-conscious influences on behavior.* Madrid, Spain.

Benotsch, E.G., Nettles, C.D., & **Kalichman, S.C.** (2005). *Methamphetamine use, sensation seeking, and high-risk sexual behavior among men who have sex with men.* Society of Behavioral Medicine, Boston, MA.

Benotsch, E.G., Bull, S.S., Nettles, C.D., & **Kalichman, S.C.** (2005). *Barebacking, Internet use to find sexual partners, and high-risk sexual behavior among men who have sex with men.* Society of Behavioral Medicine, Boston, MA.

- Kalichman, S.C.,** Cherry, C., **Cain, D.,** Pope, H. & **Kalichman, M.** (2005). *Evaluation of health information on the Internet by people living with HIV/AIDS*. Society of Behavioral Medicine, Boston, MA.
- Kalichman, S.C.** (2005). *Treatment adherence intervention for lower-literacy people living with HIV/AIDS*. Society of Behavioral Medicine, Boston, MA.
- Cain, D., Kalichman, S.,** Simbayi, L., & Jooste, S. (2004). *Sexual contact with blood and risks for HIV transmission among women in Cape Town, South Africa*. International Society for the Study of Women's Sexual Health, Atlanta.
- Kaufman, M.R. (g),** Simbayi, L., & **Kalichman, S.C.** (2004). *Gender attitudes, gender violence, and HIV/AIDS risks among men and women in Cape Town, South Africa*. International Conference on Urban Health, Boston, MA.
- Fuhrel, A. R. (g), Kalichman, S. C.,** Simbayi, L. C., & Jooste, S. (2004). *Poverty-related stressors and HIV/AIDS transmission risks in two South African Communities*. Paper at International Conference on Urban Health, Boston, MA.
- Kaufman, M.R. (g), Kalichman, S.C.,** Simbayi, L.C., & Jooste, S. (2005). *Gender, attitudes, rape myths, and STD/HIV risks among men and women in Cape Town, South Africa*. Annual Convention of the Society for Personality and Social Psychology, New Orleans, LA.
- Fuhrel, A. R. (g), & Kalichman, S. C.** (2005, January). *Repeat and regular HIV testing: Examination of contextual and social cognitive explanations*. Annual Convention of the Society for Personality and Social Psychology, New Orleans, LA.
- Benotsch, E.G., & **Kalichman, S.C.** (2005). *Sensation seeking, substance use, and high-risk sexual behavior in HIV-positive men*. Annual Convention of the Society for Personality and Social Psychology, New Orleans, LA.
- Kalichman, S.C.,** and Cain, D. (July, 2004). *Experimental Components Analysis of Theory Based HIV Prevention Counseling*. American Psychological Association, Hawaii.
- Kalichman, S.C.,** and **Kalichman, M.O.** (July, 2004). *Treatment adherence intervention for lower-literacy people living with HIV/AIDS*. American Psychological Association, Hawaii.
- Benotsch, E.G., **Kalichman, S.,** and Weinhardt, L. (September, 2004). *HIV/AIDS patients evaluation of health information on the Internet*. American Psychological Society, Chicago, IL.
- Portnoy, D.(g), & Marsh, K.L.** (2005, January). *Can what we don't know hurt us? Evaluating quality of free condoms from price and credibility cues*. Poster presented at the annual meeting of the Society for Personality and Social Psychology, New Orleans, LA.
- Scott-Sheldon, L. A. J.(g), Glasford, D. E.(g), & Marsh, K. L.** (2005, September). *Automatic reactions to products and shoppers in close proximity to condoms: How context affects condom attitudes and behaviors*. Poster presented at the meeting of the New England Social Psychological Association, Storrs, CT.

- Miller, T.W.** (2004, August). *A vision for public sector psychology*. Annual Convention, American Psychological Association, Honolulu, HI.
- Kraus, R.F. and Miller, T.W.** (2004, October). *Spiritual and cultural factors in the treatment of American Native alcoholics*. Society for the Study of Psychiatry and Culture. World Psychiatric Association
- Miller, T.W.** and Holcomb, T.F. (2004, October). *Practice guidelines & counseling interventions for mental health counselors*. Annual Convention for the Kentucky Psychological Association, Louisville, KY.
- Miller, T.W., Kraus, R.F. and Godlaski, T** (2004, October). *Developmental methodology for the study of health and spiritual beliefs*. World Psychiatric Association, Cultural Division & Society for the Study of Psychiatry and Culture Annual Congress, Providence, RI.
- Miller, T. W.** (2004, November). *Psychology: Issues in public education*, Presentation to the Connecticut Psychological Association, Old Saybrook, CT.
- Miller, T.W. & King, F.R.** (2005, April). *Distance Education and Best Practices: Critical Issues*. Presentation to the Southeastern Psychological Association, Nashville, TN.
- Miller, T.W.** (2005, May). *Interdisciplinary consultation for orthopaedic patients: Enhancing adherence and compliance*. Grand rounds presentation to the University of Louisville, School of Medicine, Department of Orthopaedic Surgery.
- Park, C. L.** (April, 2005). *Meaning as a mediator of the spirituality-quality of life link in congestive heart failure patients*. Paper presented at the symposium, Effects of Spiritually Based Interventions and Meaning on Health. (**C. L. Park, Chair**), Society of Behavioral Medicine Annual Meeting, Boston, MA.
- Fenster, J. R. (g), Mills-Baxter, M. A. (g), & **Park, C. L.** (April, 2005). *Previous trauma and resolution as determinants of health-related quality of life*. Poster session presented at the Society of Behavioral Medicine Annual Meeting, Boston, MA.
- Park, C. L., & Dornelas, E.** (April, 2005). *Spirituality and quality of life in ACS patients*. Poster session presented at the Society of Behavioral Medicine Annual Meeting, Boston, MA..
- Park, C. L., Blank, T., Fenster, J. (g), McGuinn, K. (g), Santorelli, R. (u), McGarry, M. (u), Robertson, T. W. (u)** (April, 2005). *Dimensions of spirituality and quality of life in young to midlife cancer survivors*. Poster session presented at the Society of Behavioral Medicine Annual Meeting, Boston, MA.
- Park, C.L.** (April, 2005). Discussant for symposium: *Toward a better understanding of meaning and benefit finding following a cancer diagnosis: Revisited...again*. P. Tomich, (Chair), Society of Behavioral Medicine Annual Meeting, Boston.
- Park, C. L., & Edmondson, D. (G).** (April, 2005). *Religious and spiritual dimensions as determinants of health behaviors in college students: Mediation models*. Paper

presented at the Annual Midwinter Meeting of Division 36, American Psychological Association, Baltimore, MD.

- Park, C. L.** (April, 2005). *Highlighting the making of meaning*. Paper presented in symposium, Integrative Themes in the Psychology of Religion. R. F. Paloutzian (Chair). Paper presented at the Annual Midwinter Meeting of Division 36, American Psychological Association, Baltimore, MD.
- Park, C. L.,** & Blank, T. (May, 2005). *Positive life changes in young and middle-aged cancer survivors*. NCI Small Grants Conference, Bethesda, MD.
- Park, C. L.,** & Berman, H. (February, 2005). *Meaning making in the context of a cancer diagnosis*. Poster session presented at the American Psychosocial Oncology Society, Phoenix, AZ.
- Schuster, J. L. (g), Wachen, M. (g), & **Park, C. L.** (August, 2004). *The impact of religion on coping and stress-related growth*. Poster session presented at the Annual Meeting of the American Psychological Association, Honolulu, HI.
- Wachen, M. (g), Schuster, J. L. (g), & **Park, C. L.** (August, 2004). *The Influence of spirituality on college student health behaviors*. Poster session presented at the annual American Psychological Association, Honolulu, HI.
- Anderson, A.K., Damio, G., Young, S., Chapman, D., and **Pérez-Escamilla, R.** (September, 2004) *Impact of peer counseling on exclusive breastfeeding among low-income inner-city women: A randomized controlled trial*. Presented at the 12th International Conference of the International Society for Research in Human Milk and Lactation (ISRHML) at Queen's College, Cambridge, MA. Book of Abstracts, page 58.
- Chapman, D., Damio, G., and **Pérez-Escamilla, R.** (September, 2004) *Economic analyses of the costs and savings of breastfeeding peer counseling within the WIC program*. Presented at the 12th International Conference of the International Society for Research in Human Milk and Lactation (ISRHML) at Queen's College, Cambridge, MA.; Book of Abstracts, page 60.
- Anderson A.K., Damio G., and **Pérez-Escamilla R.** *Determinants of exclusive breastfeeding at 2 months among low-income women in Connecticut*. EB 2005 meetings, San Diego, CA.
- Hromi, A., **Pérez-Escamilla, R.**, Bermúdez-Millán, A., Segura-Pérez, S., Damio, G. *Validity of the U.S. household food security module among low-income pregnant Latinas*. EB 2005 meetings, San Diego, CA.
- Bermúdez-Millán, A., **Pérez-Escamilla, R.**, Damio, G., Hromi, A., Segura-Pérez, S. *Nutrient contribution of eggs among pregnant Latinas*. EB 2005 meetings, San Diego, CA.
- Sampaio, M.F.A., de Oliveira, J.T.A., Kepple, A.W., Segall-Corrêa, A.M., Leon-Marín, L., Bergamasco, S.M.P., **Pérez-Escamilla, R.** *Validation of the USDA Food Insecurity Module rural areas in the state of São Paulo, Brazil: Qualitative phase*. EB 2005 meetings, San Diego, CA.



- Melgar-Quinonez, H.R., Nord, M., **Pérez-Escamilla R.**, Segall-Corrêa, A.M.  
*Psychometric properties of the US-household Food Security Module in Campinas, Brazil.* EB 2005 meetings, San Diego, CA.
- Pérez-Escamilla, R.**, Parás, P., Dolkar, T., Melgar-Quinonez, H. *The USDA Food Security Module is a valid tool for assessing household food insecurity in Mexico City.* EB 2005 meetings, San Diego, CA.
- Fitzgerald, N., Segura-Pérez, S., Damio, G., Peng, Y.K., **Pérez-Escamilla, R.** *Food insecurity is associated with low nutrition knowledge among Latinas with and without type 2 diabetes.* EB 2005 meetings, San Diego, CA.
- Chapman, D., Damio, G., and **Pérez-Escamilla, R.** *Economic impact of providing breastfeeding peer counseling as a standard WIC service: A societal approach.* EB 2005 meetings, San Diego, CA.

### **Invited scholarly colloquia, presentations or symposia**

- Barta, W.D.** (February 16, 2005). *Using technology to collect idiographic data and promote behavior change.* Presentation sponsored by the Department of Psychology, College of William and Mary, Williamsburg, VA.
- Barta, W.D.** (February 28, 2005). *Using technology to collect idiographic data and promote behavior change.* Presentation sponsored by the Center for AIDS Research (CFAR), Brown University / Rhode Island Hospital, Providence, RI.
- Barta, W.D. & Kiene, S. M.** (March 18, 2005). *Using technology to collect idiographic data and promote behavior change.* Presentation sponsored by the Alcohol Research Center, University of Connecticut Health Center, Farmington, CT.
- Broadhead, R.** (October 2004) *Variations in the peer-driven intervention (PDI) model for IDUs in Russia and Vietnam.* Seminar on Drug Policy and HIV Prevention in Russia, Yale University Center for Interdisciplinary Research on AIDS,
- Broadhead, R.** (November 2004) (with Doan Ngu, Hoang Ngoc Quyen, Liu Wei, Chen Yi, Theodore Hammett): *Baseline results from the Ha Giang (Vietnam) & Guigang (China) Peer Driven Interventions.* Vietnam-China Cross-Border HIV Prevention Project Bi-Annual Meeting, Lang Son, Vietnam
- Broadhead, R.,** Borch, C., Sher, E., van Hulst, Y., Heckathorn, D.D., (January 2005). *Improving the peer-driven intervention (PDI) model to prevent HIV among IDUs in Russia.* Paper presented at Center for HIV/Health Intervention and Prevention Colloquium Series, University of Connecticut, Storrs.
- Copenhaver, M.** (September, 2004). *Integrating HIV Prevention in Substance Abuse Treatments.* Invited oral presentation and panel member for NIH/NIDA workshop, Bethesda, MD.
- Fisher, J.D.,** (May 25, 2004). Invited presentation entitled “*Changing HIV Risk Behavior and Increasing ART Adherence.*” Presentation sponsored by Aurum Health

Research (AHR), South Africa. Tele-Video Conference between South Africa and Connecticut. [Omitted from last year's report]

**Fisher, J.D.**, (June 23, 2004). Invited presentation entitled “*UConn Center for Health/HIV Intervention & Prevention.*” Presented at CIRA Annual Meeting, Yale University, New Haven, CT.

**Fisher, J.D.**, (October 26, 2004). Invited presentation entitled “*Changing HIV Risk Behavior: Fifteen years of theory-based research and interventions.*” Presentation sponsored by Department of Psychology, University of Puerto Rico, San Juan, Puerto Rico.

**Fisher, J.D.**, (October 27, 2004). Invited presentation entitled “*Changing HIV Risk Behavior.*” Presentation sponsored by Department of Psychology, Carlos Albizu University, San Juan, Puerto Rico.

**Fisher, J.D.**, (December 6, 2004). Invited presentation entitled “*Options Project – Findings to date, and implementation into practice.*” Presentation sponsored by PHSKC HIV/STD Program, Madison HIV Clinic, University of Washington CFAR Sociobehavioral and Prevention Research Core, & Region X STD Prevention Training Center, Harborview Medical Center, Seattle, WA, December 6, 2004.

**Fisher, J.D.**, (December 6, 2004). Invited presentation entitled “*IMB Model of HIV Risk Prevention.*” Presentation for the James F. McDowell Foundation, Dolce Tarrytown House, Tarrytown, NY, January 8, 2005.

**Fisher, J.D.**, (April 14, 2005). Invited presentation entitled “*Changing HIV Risk Behavior: Fifteen years of theory-based research and interventions.*” Presentation sponsored by Brown University and Rhode Island Hospital, General Internal Medicine Research Unit, Brown Medical School, Providence, RI.

**Fisher, J.D.**, (May 18, 2004). Invited presentation entitled “*Changing HIV Risk Behavior: Fifteen years of theory-based research and interventions.*” Presentation sponsored by the Center for Population and Development of the Harvard University School of Public Health, Boston, MA.

**Fisher, W.A.** (November, 2004). *Internet Pornography*. Israel Sex Therapy Association, Tel Aviv, Israel.

**Fisher, W.A.** (March, 2005). *Internet Pornography*. Israel Psychological Association, Study Day, Tel Aviv, Israel.

**Fisher, W.A.** (April, 2005). *Scientific Study of Sex: Psychological Perspectives*. Tel Aviv University, Department of Physiology, Tel Aviv, Israel.

**Marsh, K. L.** (2005, March). *Grounding individual mind, motive, and motion in a social context*. Psychology Department Colloquium series, University of Connecticut.

**Marsh, K. L.** (2005, February). *What use is the ecological approach to those NOT studying perception?* Invited talk in the Industrial/Organizational Psychology Brown Bag, University of Connecticut.

- Richardson, M. J.(g), **Marsh, K. L.**, & Schmidt, R. C. (2005, April). *The self-organization of interpersonal perception-action systems*. Invited talk in the 1<sup>st</sup> Joint Action Meeting, Rutgers University, Newark, NJ.
- Harman, J. J.(g), Johnson, B. T., & Marsh, K. L.** (2005, January). *Parental investment theory and attitudes towards condoms in intimate relationships: Gender differences in response to relationship threat*. Paper presented in J. J. Harman & H. Patrick (Chairs) symposium, "For Better or worse: The Influence of close relationships on health," Society for Personality and Social Psychologists, New Orleans.
- Harman, J. J.(g), Johnson, B. T., & Marsh, K. L.** (2004, October). *Relationship closeness under threat: Gender differences in attitudes towards condoms*. Paper presented in M. Clark (Chair) symposium conducted at Society for Experimental Social Psychologists, Fort Worth, TX.
- Marsh, K. L.** (2005, October). *Heart versus reason in predicting risky sex*. Invited colloquium, Department of Psychology, Denison University, Granville, Ohio.
- Neafsey, P.J.** *Preventing medicine conflicts with touchscreen technology*. Presentation and exhibition at Diabetes and Medication Management & Telehealth Technology for Home Care, Home Care Assoc. of New York 3rd Annual Clinical Technology Conference, Albany, NY, Oct. 5-6, 2004.
- Park, C. L.** (May, 2005). *What is really going on with stress-related growth?* Paper presented at the Conference on Positive Life Changes in the Context of Medical Illness, Storrs, CT.
- Park, C. L.** (March, 2005). *Religion and making meaning from stressful life events*. Colloquium, Department of Psychology, Connecticut College, New London, CT.
- Park, C. L.** (January, 2005). *Post-Traumatic Stress: What we know (and what we don't know but would like to)*. Presented at the National Center for PTSD, Boston, MA.
- Pescatello, L.,** (2004). *Acute effects of endurance exercise on blood pressure*. New England Chapter American College of Sports Medicine. Providence, CT.
- Pescatello, L.,** (2004). *Plasma fibrinogen alters postexercise hypotension*. New England Chapter American College of Sports Medicine. Providence, CT.
- Pescatello, L.,** (2004). *Suspected neuromuscular dysfunction of the hip during recreational running: a case study inservice*. Nayden Rehabilitation Clinic. University of Connecticut, Storrs, CT.
- Pescatello, L.,** (2004). *Exercise and Health: The Influence of Lifestyle and Genes*. Buckeley High School, Health Professions Academy Academic Enrichment Program. Department of Health Career Opportunity Programs. University of Connecticut Health Center, Farmington, CT.
- Pescatello, L.,** (2005). *Plasma fibrinogen alters postexercise hypotension*. American College of Sports Medicine, Nashville, TN.

- Pescatello, L.,** (2005). *Excess adiposity limits the muscle strength response to resistance training*. American College of Sports Medicine, Nashville, TN.
- Pescatello, L.,** (2005). *ACE I/D polymorphism alters the muscle strength response to resistance training*. American College of Sports Medicine, Nashville, TN.
- Pescatello, L.,** (2005) *Publishing ACSM Position Stands: Procedures and a Review of Those in Preparation*. American College of Sports Medicine, Nashville, TN.
- Snyder, L.B.** (2005, January 17). *The effects of alcohol advertising on youth drinking over time*. Presented to the National Association of Attorneys General, Chicago, IL.

### **Keynote or plenary lectures.**

- Fisher, J.D. (2005, April). Keynote address, “*HIV Risk Behavior Change Interventions for Seropositives: Initial Ideas on Theory and Practice.*” Fisher, J.D. (2005, April). 7<sup>th</sup> International AIDS Impact Conference, Cape Town, South Africa.
- Kalichman, S.C. (2005, April). *Positive Prevention: Risk Reduction Interventions for People Living with HIV/AIDS in a Global Context*. Invited Plenary Presentation at the 7<sup>th</sup> International AIDS Impact Conference, Cape Town, South Africa.

### **Miscellaneous Other Publications**

CHIP has produced and distributed, and continues to sell, copies of HIV prevention videos produced under the direction of Dr. Jeffrey Fisher. Proceeds (about \$350,000 thus far) have gone to supporting HIV prevention research at the University of Connecticut.

## **15. CHIP Cores**

Beyond the project-based research groups directed by individual PIs, CHIP researchers and affiliates are organized into Administrative and Research Cores. The CHIP Cores for the June 30, 2004 – June 30, 2005 period were:

### **Administrative Core**

Jeffrey D. Fisher, UConn, Dept. of Psychology, *Director of CHIP*  
 Deborah Cornman, UConn, Dept. of Psychology, *Associate Director of CHIP*  
 Brian Bemis, UConn, Department of Psychology, Information Technology Specialist  
 Demetria Cain, UConn, Dept. of Psychology, Program Manager  
 Jody Flanagan, UConn, Dept. of Psychology, CHIP Secretary  
 Katrease Gerace, UConn, Dept. of Psychology, CHIP Operations Manager  
 Moira Kalichman, UConn, Dept. of Psychology, Program Manager  
 Melissa Stone, UConn, Dept. of Psychology, Financial Assistant  
 Zoe Strickler, UConn, Dept. of Psychology, Coordinator, Multidisciplinary Research  
 Iona Wilper, UConn, Dept. of Psychology, Grant Manager

### **Conceptual Basic Processes of Change Core**

V. Bede Agocha, Ph.D., UConn Dept. of Psychology  
Jeffrey D. Fisher, Ph.D., UConn Dept. of Psychology  
William A. Fisher, Ph.D., University of Western Ontario, Dept. of Psychology  
Blair T. Johnson, Ph.D., UConn Dept. of Psychology  
Kerry Marsh, Ph.D., UConn Dept. of Psychology  
Crystal L. Park, Ph.D., UConn Dept. of Psychology  
Howard Tennen, Ph.D., UCHC, Dept. of Community Medicine

### **Intervention Core**

Jeffrey D. Fisher, Ph.D., UConn, Dept. of Psychology, *Director of CHIP*  
William A. Fisher, Ph.D., University of Western Ontario, Dept. of Psychology  
Frederick Altice, M.D., Yale University, Infectious Diseases  
K. Rivet Amico, Ph.D., CHIP, (Consultant, Statistics and Methods)  
William Barta, Ph.D., CHIP, UConn, Dept. of Psychology  
Robert Broadhead, Ph.D., UConn, Dept. of Sociology  
Michael Copenhaver, Ph.D., UConn, Dept. of Psychology  
Deborah Cornman, Ph.D., UConn, Dept. of Psychology  
Kevin Dieckhaus, M.D., UCHC, Infectious Diseases  
Ann Ferris, Ph.D., UConn, Department of Nutrition, CANR  
Gerald Friedland, M.D., Yale University, School of Medicine, Director, AIDS Program  
Michie Hesselbrock, Ph.D., UConn, Dept. of Social Work  
Seth Kalichman, Ph.D., UConn, Dept. of Psychology  
Carol Lammi-Keefe, Ph.D., UConn, Department of Nutrition, CANR  
Mark Litt, Ph.D., UCHC, Dept. of Behavioral Science and Community Health  
Thomas Miller, Ph.D., UConn, Dept. of Health Promotion, School of Allied Health  
Patricia J. Neafsey, Ph.D., UConn, School of Nursing (Pharmacology)  
Rafael Pérez-Escamilla, Ph.D., UConn, Dept. of Agricultural Economics (CANR)  
Juan Salazar, M.D., UCHC, Dept. of Infectious Diseases, (Pediatric HIV/AIDS, CCMC)  
Eugene Santos, Jr., D. Eng., UConn, Dept. of Computer Science and Engineering  
Jean Schensul, Ph.D., Senior Scientist, Institute for Community Research, Hartford  
Stephen Schensul, Ph.D., UCHC, Dept. of Community Medicine & Health Care  
Leslie Snyder, Ph.D., UConn, Dept. of Communication Sciences  
Zoe Strickler, M.Des., UConn, CHIP, Dept. of Psychology

### **Statistics / Methodology / Cost Effectiveness Analysis Core**

Blair Johnson, Ph.D., UConn, Dept. of Psychology (Meta Analysis)  
K. Rivet Amico, Ph.D., CHIP, (Consultant)  
Ann O'Connell, Ed.D., UConn, Dept. of Education Psychology (HLM)  
Bruce Larson, Ph.D., UConn, Dept. of Agricultural Economics (Cost Effectiveness)  
Angela Bryan, Ph.D., University of Colorado, Dept. of Psychology (Consultant)  
David A. Kenny, Ph.D., UConn, Dept. of Psychology (Consultant)  
Stephanie Milan, Ph.D., UConn, Dept. of Psychology  
Leslie Snyder, Ph.D., UConn, Dept. of Communication Sciences

### **International Core**

Robert Broadhead, Ph.D., UConn, Dept. of Sociology  
Demetria Cain, UConn, Dept. of Psychology, Program Manager  
Pamela Erickson, Ph.D. UConn, Dept. of Anthropology  
Jeffrey D. Fisher, Ph.D., UConn Dept. of Psychology  
William A. Fisher, Ph.D., University of Western Ontario, Dept. of Psychology  
Seth Kalichman, Ph.D., UConn, Dept. of Psychology  
Sarah Christie, M.P.H., UConn Dept. of Psychology, Program Manager  
Deborah Cornman, Ph. D., UConn Dept. of Psychology  
Geeta Pfau, Ph.D. Student Health Services, Eastern Connecticut State University  
Steve Schensul, Ph.D., UCHC, Dept. of Community Medicine & Health Care

### **Community Core**

K. Rivet Amico, Ph.D., CHIP (consultant)  
Preston Britner, Ph.D. UConn Dept. of Family Studies  
Robert Broadhead, Ph.D., UConn Dept. of Sociology  
Michael Copenhaver, Ph.D., UConn Dept. of Psychology  
Deborah Cornman, Ph.D., UConn Dept. of Psychology  
Michie Hesselbrock, Ph.D., UConn Dept. of Social Work  
Olga Jarrin, MA, UConn School of Nursing  
Carol Lammi-Keefe, Ph.D., UConn Dept. of Nutritional Sciences  
Ann O'Connell, Ed.D., UConn Dept. of Educational Psychology  
Rafael Pérez-Escamilla, Ph.D., UConn, Dept. of Agricultural Economics (CANR)  
Mark Litt, Ph.D., UCHC, Dept. of Behavioral Science & Community Health  
Jean Schensul, Ph.D., Senior Scientist, Institute for Community Research, Hartford  
Steve Schensul, Ph.D., UCHC, Dept. of Community Medicine & Health Care

### **Ethics, Law, and Social Policy Core**

Zita Lazzarini, J.D., UCHC, Dept. of Community Medicine & Health Care  
Alysia Maffucci, J.D., UConn, Office of Sponsored Programs  
Kristin Kelly, Ph.D. UConn, Dept. of Political Science

## **16. New CHIP Staff Capability**

Due to its rapid growth to in excess of \$8.1 million in active grants and over \$16 million in submitted grants during fiscal year 2005, CHIP has found that it is crucial for the Center to have staff with the skills to maintain budget processes and active balances for the collective and individual grants managed by the Center, as well as the Center's own funds. In September 2004, Katrease Gerace joined the Center as the office manager. Katrease has brought nearly ten years of experience to CHIP. She provides management of the Center's budgeting, day-to-day operations, staff supervision and assistance with grant management. She works closely with CHIP principal investigators and with the staff of the Psychology Department to perform these functions. In March of 2005 Iona Wilper joined the Center as a full time grants manager. Iona was a financial manager for the federal government for nearly 20 years. The CHIP staff is developing an administrative team approach that has areas of expertise in Organizational and Grants Management. It is the goal of the staff to be able to provide comprehensive support for principle investigators and researchers affiliated with CHIP. The administrative team's foci are to facilitate the administrative functions of the grants associated with CHIP while ensuring compliance with the University's fiscal procedures and auditing requirements. The CHIP administrative team consists of Katrease Gerace, office manager (100% FTE), Iona Wilper, grants manager (100% FTE), Melissa Stone, fiscal assistant (100% FTE), Jody Flanagan, administrative support (50% FTE), Brian Bemis, computer consultant (95% FTE), Stacey Leeds, lecture series and project development coordinator (50% FTE), and Zoe Strickler, multidisciplinary research coordinator (25% FTE).

## **17. CHIP Facility and Technology Goals**

Central to CHIP's impressive growth is the CHIP Research Center facility at 2006 Hillside Road on the University of Connecticut, Storrs campus. Since taking occupancy of the 9000 square foot facility in March 2003, CHIP investigators and administrative staff have worked to establish it as a highly productive site for multidisciplinary, collaborative research in health behavior change. The resulting dramatic growth has shown convincingly that having the ability to house investigators from multiple disciplines and their research teams in a single site greatly facilitates the evolution and the conduct of collaborative multi- and interdisciplinary research. Since moving into the facility less than two years ago, CHIP investigators have competed successfully for \$12.3 million in total costs in new grants.

The current CHIP research facility houses office space for 13 faculty, Ph.Ds, and post-docs, 10 research associates, 7 staff, and 13 graduate student researchers who represent several key disciplines, the vast majority of whom are funded by external grants. A very substantial amount of funded research is conducted in the facility, which in addition to research staff houses five small interview cubicles for conducting research, two meeting and presentation rooms that can also be used for research, a focus group room, and a small library for CHIP's health behavior change resources. The main conference room where

major meetings and presentations are held is outfitted with multimedia presentation capability.

At this time, the CHIP research facility is full – current occupancy substantially *exceeds* the capacity in the original blueprints, and this situation has implications for CHIP’s future growth. For CHIP to continue to grow as a multidisciplinary center, as it has in the past several years, and indeed for new grants of the current scope to be submitted (since they require substantial personnel), CHIP critically needs additional space. For this reason, CHIP has requested approval from the University to acquire and renovate the second floor of Ryan Refectory (upstairs from the current CHIP facility), which would provide the center with an additional 12,000 square feet. Such approval has not yet been granted, but is urgently needed. (For preliminary floor plan, please see p.70).

It is expected that this added space will permit us to accommodate an additional 10 PhDs, 20 additional graduate students, and ten project-related support staff, as well as critical research laboratories (described below). This action will permit more CHIP-affiliated faculty from additional UConn departments to be housed in the research facility along with their graduate students to conduct research. Under this plan, faculty, postdocs, and students from psychology, sociology, anthropology, nursing, nutritional sciences, communication sciences, allied health, and other fields can be housed together, work together on research projects, and apply for additional funding together. This will include many of the most productive researchers at the University, up to five of whom have consistently had external funding in excess of one million dollars per year. There will also be space for faculty affiliates from the new School of Public Health and for planned new collaborations with the Neag Cancer Center. This enhanced multidisciplinary environment will have vast benefits to UConn, resulting in improved research and additional funding opportunities, as well as unique opportunities for mentoring students and junior faculty.

Conservatively, it is anticipated that over the next three years, the receipt of \$15 million or more in *new* grants will be made possible by this expansion. In effect, the costs of renovation will be paid for by additional indirects generated by new grants within a short period of time. If this new space is not made available, CHIP research grants will likely stay level, or will contract somewhat. Moreover, without additional space, due to anticipated increased funding (e.g., J. Fisher is about to submit a new \$5 million grant in addition to the \$5 million grant he already has, and it is apt to be funded), it is likely that a few CHIP faculty (Fisher, Kalichman) will either need to expand their space within the current facility to such an extent that many of the current occupants will have to move out, or will have to move out themselves. This would severely damage the unique multidisciplinary environment at CHIP which has made it so successful.

In addition to the proposed new space for personnel offices, a portion of the space on the second floor will be devoted to the creation of a multidisciplinary laboratory (a) for the use of new technology in the context of health behavior change research, and (b) for the dissemination of theory-based interventions developed at CHIP internationally. (Please see New Technology Initiatives, p. 65 for discussion). CHIP already has a sizeable grant portfolio (approximately \$7 million) of projects that use state-of-the-art technology



(video, computers, DVD, telemedicine) to change unhealthy behavior, and has four additional R01s in this area now submitted. The director of CHIP (Jeffrey D. Fisher) is well-known in the health behavior research community for having pioneered the use of video in theory-based health behavior change interventions. Moreover, the NIMH has expressed interest in ultimately supporting CHIP as a Center with a specialized mission to develop technology-based health behavior change interventions that can be broadly disseminated nationally and internationally.

## **18. CHIP New Technology Initiatives**

Advanced technology for health behavior change research at CHIP is being pursued in six inter-related technology initiatives, preliminary plans for which are now underway. These involve 1) creation of **multi-media production capability at CHIP** to advance sophisticated use of visual media and information technology in health behavior change intervention and prevention research; 2) development of **webcasting, telehealth, and videoconferencing capability at CHIP** to enhance health behavior change research development and dissemination; 3) development of **immersive virtual technology** expertise for advancement of health behavior change research; 4) development of **electronic questionnaire and web-based survey capability**; 5) creation of a **CHIP Digital Library** to make scholarship and tools developed at CHIP available to CHIP investigators developing new research and to others; and in collaboration with CLAS, 6) creation of research support capability for proposed new **graduate academic programming** (masters and PhD) at UConn **in the areas of Health Communication and Health Information Technology**. Each of these initiatives has great potential to enhance multidisciplinary research development among CHIP investigators, and/or to attract substantial external research funds. A preliminary floor plan for the proposed second floor area (p. 63) shows how these activities would be coordinated in a central technology quad, with several bays and rooms designated for specific capabilities.

### *Technology Objectives*

#### **1) Intervention Multimedia Development**

CHIP has a 10-year history of using cutting-edge media in research to deliver health behavior change interventions to targeted populations. Use of high-quality visual media (video and computer-interactive formats) in validated, theory-based, health interventions has been shown both to increase the effectiveness of intervention delivery, and to reduce the cost of disseminating intervention research in community settings. The NIH is keen to fund projects that employ new media to enhance the reach, impact, and cost effectiveness of health behavior change interventions among at-risk populations, and has expressed interest in promoting CHIP as center with key expertise in this area.

At present, CHIP has one large funded grant (**Jeffrey D. Fisher**, NIMH, \$5 million, *Changing ART Adherence Behavior*), and several R01s submitted, that employ interactive multimedia and/or innovative communication technology to deliver health behavior change interventions to high-risk audiences. These include: **Patricia J. Neafsey**, School

of Nursing, and **Zoe Strickler**, visual communication design, CHIP, *Reducing Adverse Self-Medication Behaviors in Older Adults with Hypertension*, submitted to NIH/AHRQ; **Michael Copenhaver**, Psychology, CHIP, “*CBT to Prevent HIV for Pregnant Drug Abusers in Treatment*”, submitted to NIH/NIDA; **Leslie Snyder, Carolyn Lin**, Communication Sciences, and **William Barta**, Psychology CHIP, *HIV Prevention Computer Game for Urban, Minority, Emerging Adults*, submitted to the CDC; and **Jean J. Schensul**, Senior Scientist, Institute for Community Research, *A Site-based Social Marketing Intervention To Prevent Party Drug Use w/ Urban Youth*, submitted to the CDC. [The last two R01s in the list above, headed by Drs. Snyder, Barta, Lin, and Schensul, have been put forward in the context of a **Center Grant**, proposal to the CDC in response to an announcement released in early May, 2005 entitled “*Centers of Excellence in Health Marketing and Health Communication*,” **PI Leslie Snyder**. CHIP worked with the Communications Office of the State of Connecticut Department of Public Health and over 40 University of Connecticut investigators and health professionals from community-based organizations in applying for this funding for a new “center-within-a-center,” based at CHIP, to pioneer advanced research in health communication and social marketing theory and technology in Connecticut.]

Additional CHIP investigators who have used visual media and social marketing technology in behavior change interventions, and who plan to partner with CHIP in developing new research in this area are CHIP affiliates **Carolyn Lin**, Communication Sciences (effect modeling to prevent alcohol abuse in college age students), **Rafael Pérez-Escamilla**, Nutritional Sciences (diabetes prevention and management for low income urban populations) and **Tom Szigethy**, UConn Office of Alcohol and Other Drugs, (alcohol and substance abuse prevention among college age students).

A long-range goal at CHIP is to build capability within CHIP for multimedia development for research involving health behavioral interventions. In collaboration with faculty and graduate students in Communication Sciences, CLAS, Visual Communication Design in the School of Fine Arts, and Computer Sciences and Engineering, CHIP hopes to soon be able to conduct research into variables related to visual and communication factors media-based health interventions. For selected projects, this approach will permit more extensive control over variables associated with new media, and more rigorous evaluation of prototypes, user-experiences, and intervention effect, than is the norm for research where prototypes and production are sub-contracted to commercial vendors. At present, data on many potentially important communication and media factors associated with health communication are not captured or reported in health research because fully interdisciplinary research in this area is rare. Considerable gaps in knowledge and literature exist with respect to matters such as visual factors, the role of aesthetic presentation, patient health literacy and comprehension of health materials, and cultural appropriateness of interventions, despite the availability of large amounts of funding for such work. Investigators at CHIP hope to create new models for uses of media in health behavior research that will ultimately increase understanding regarding enhancing the effectiveness of health interventions that employ digital and visual media.

## 2) Webcasting, telehealth, and video conferencing

CHIP is currently exploring technical requirements and costs for developing webcasting, telehealth, and videoconferencing capability at the Center. These initiatives will enhance existing CHIP research programs and dissemination of theory based interventions developed at CHIP, as well as support new, original research specifically in this area.

*Webcasting* is the use of the Internet and video streaming technology to deliver live, video-based and interactive content to individuals at remote workstations anywhere in the world, or for facilitating live video conferencing. *Telehealth* involves use of video, telephones, and Internet technology to link health care providers, researchers, and patients for patient care and health information dissemination.

CHIP research projects and programs that will be strengthened by this initiative include:

*Telehealth:* In FY05 CHIP investigators **Thomas Miller**, Allied Health and **Jeffrey Fisher**, Psychology received a grant from the State of Connecticut Department of Health, HIV/AIDS Division, to test deployment of *telehealth* technology to improve medical outcomes and rates of adherence to antiretroviral therapy (ART) among HIV positive patients living in rural Connecticut. The telehealth intervention developed by Drs. Miller and Fisher, uses video phone and Internet technology to link physicians working in rural areas with HIV infectious disease specialists in Farmington, Hartford, and New Haven. In these interactive, videophone sessions (live visual and audio contact), the specialists can share latest findings and guidance for prescribing optimal ART regimens to improve patient adherence and medical outcomes, in a time-sensitive and economical format with many remotely linked family practitioners at one time. The State of Connecticut is eager to expand use of this technology to other health problem areas in partnership with CHIP following outcomes from the clinical trial.

*Webcasting:* **Carolyn Lin**, Professor of Communication Sciences and a CHIP affiliate, is developing basic research in webcasting for health behavior change and prevention interventions. Dr. Lin's work involves comparing delivery of health communication and intervention via broadcast and webcast media, against conventional intervention approaches. She is preparing a project for external funding in the area of alcohol abuse that involves interactive, computer simulation of alcohol consumption and poisoning effects in a computer animated human figure that students can modulate. The intervention is coupled with online survey data collection, delivery of prevention content, and behavioral measurement over time.

*Video conferencing:* In addition to webcasting for original research, CHIP has a pressing need to develop internal video conferencing capability for daily conduct of distance and international research collaboration and research dissemination. An increasing number of large, externally funded projects at CHIP are now international in scope. These involve frequent contact with research collaborators and clinical sites across the globe, now conducted by phone. Video conferencing via the Internet at CHIP, utilizing much of the same equipment and facilities capability defined in the webcasting initiative, has the potential to link research partners at CHIP/UConn and UConn/Farmington, the State of Connecticut Department of Public Health, and researcher partners at Yale with individuals

based at remote research sites anywhere in the world. This capability will reduce travel, and permit rapid and effective communication and decision-making among individuals at three or more sites simultaneously. There is also a tremendous need for the dissemination of breaking research findings and training to health providers at remote international sites, such as with our clinical partners in South Africa.

*Dissemination of the CHIP Brown Bag Lecture Series:* For the past three years CHIP has sponsored its Brown Bag lecture series and an international lecture series (sponsored in FY05 with support from the Boeringer-Ingelheim pharmaceutical company). These series bring leading national, and international, researchers in health behavior change to CHIP to give presentations on breaking research findings to CHIP affiliates and graduate students, and to meet with CHIP faculty, students, and research personnel in individual and small group sessions. CHIP receives numerous requests throughout the year from its research affiliates, and individuals at clinical sites and agencies throughout the State, to make these lectures and discussions available for those unable to travel to the Storrs campus for the events.

In response to this need, CHIP has begun to videotape its lectures and presentations. Currently, approved PowerPoint presentations for the Brown Bag and International lectures are made available on the CHIP Website, but a next phase is planned whereby the videotaped lectures will also be posted on the website to be downloaded by those unable to participate. Development of full webcasting capability is the next phase being explored by a team at CHIP that includes IT specialist Brian Bemis, manager Katrease Gerace, and Professor Carolyn Lin of Communication Sciences. During full webcasting, distance participants will be able to “log-in” from remote sites to hear presentations and smaller discussion groups “live,” and will be able to pose questions via the Internet while the groups are in session. This virtual inclusion of a larger subset of our colleagues, and potentially national colleagues, as well, at each session could greatly enhance the value and profile of this program for the University of Connecticut.

### **3) Immersive virtual technology**

CHIP principal investigator Kerry Marsh, Psychology, conducts research that explores the role of implicit attitudes in HIV risk behavior and preventive action. Her study of implicit attitudes involves exposing research participants to sets of juxtaposed visual stimuli to elicit attitudinal responses outside the range normally verbalized, or consciously expressed, by individuals. A next step of her research is immersive virtual technology, in which participants are, for short periods, more fully embedded in virtual visual environments for attitude research. Technology and facilities described above will make possible further development in this area. CHIP Affiliate Eugene Santos, Jr., Computer Science and Engineering, is a specialist in computer simulation and immersive virtual technology. He conducts extensive, ongoing work in the area, and has begun to partner with CHIP researchers on technology-based research in health behavior change.

#### **4) Electronic questionnaire and web-based survey capability**

A number of CHIP investigators conduct survey research for health behavior change. One element of the CHIP technology initiative is support of CHIP investigators in moving toward *teleforming* for survey research. This approach allows automation of a number of survey functions including streamlining of data collection and data entry. Custom forms may be designed within a given software package, and data collected can then be read via a scanner and transferred directly to a hard drive, eliminating manual data entry. Verification and correction modules allow a researcher to clarify data and correct errors without manually entering any data, and data may be converted to a database of choice for analysis.

#### **5) CHIP Digital Library**

The CHIP Digital Library is a proposed information technology resource that will provide students and researchers and collaborators easy access to important information related to CHIP investigations. Over the years, CHIP researchers have created many articles and interventions related to health risk behavior and processes of health behavioral change. These resources include publications, intervention manuals, and measures developed by CHIP principal investigators and affiliates. The goal of this project is to move these materials into an electronically searchable medium to allow researchers to quickly find information they need related to CHIP projects. This medium will ideally be presented online in a form that will allow others access to the information and tools, as well.

CHIP is interested in providing access to two major types of resources. The first type includes any and all publications related to CHIP investigations. These include published and unpublished manuscripts that have been authored by CHIP principal investigators and affiliates, and include a wide range of topics related to health behavior studies. The second resource is the “CHIP Lectures” presentation materials. Over the past few years, CHIP has sponsored bi-weekly talks by experts in many fields related to health behavior change and HIV research. These “Brown Bag” lectures and the “International Lecture Series” (described earlier) provide a forum for CHIP investigators, affiliates, and research staff to hear presentations about new work in development by leading figures in health intervention and prevention in the US and from around the world.

CHIP has collected many of the PowerPoint presentations from these lectures over the years and posts them to the CHIP Website. We have also recently begun to record each of the presentations on digital video. A goal for the coming year is to not only post the PowerPoint presentations, but to combine video and audio capabilities to the presentations on the website to give a full multimedia experience to individuals unable to attend the lectures or at sites far removed from UConn, Storrs.

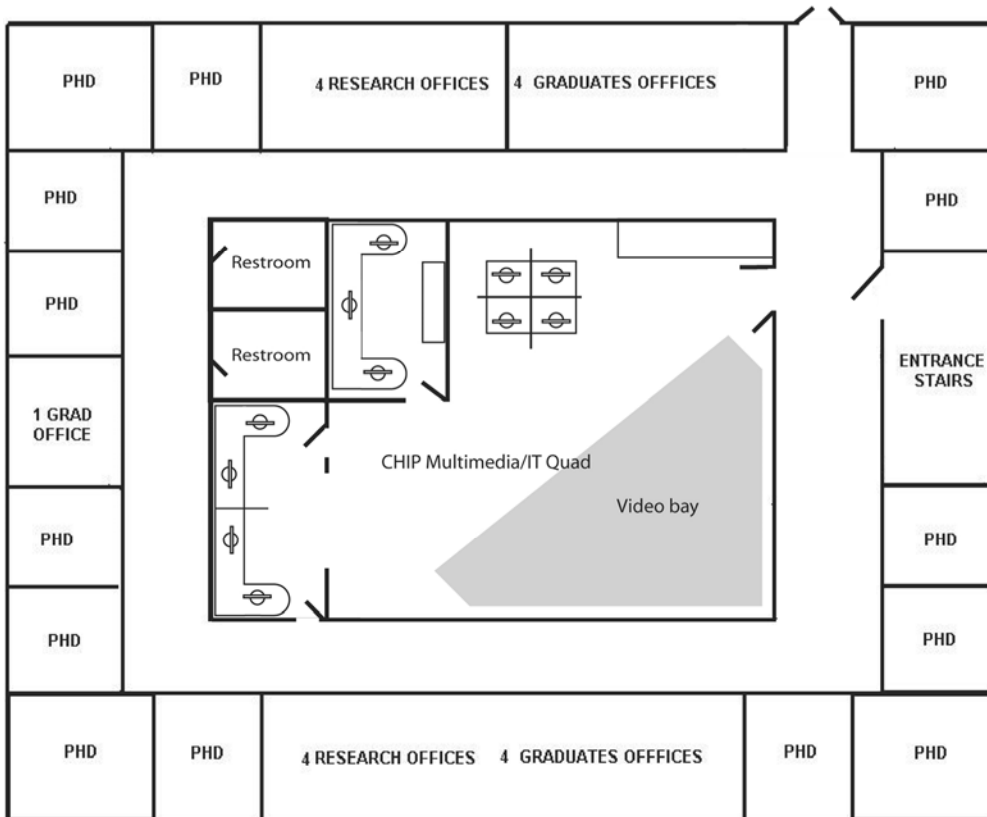
Before a full range of CHIP resource materials can be made available over the Internet (e.g., articles by CHIP PI's), certain concerns need to be addressed—key among them, copyright protection. The majority of research articles produced by CHIP affiliates are published in peer-reviewed journals and books that are owned by major publishers. CHIP is exploring the matter of obtaining permissions for key resources, and for securing

copyright ownership for future materials produced at CHIP, in order to make them more widely accessible.

CHIP is also working closely with the UConn Library, which is currently piloting a project known as the “Digital Commons,” or the “knowledge repository.” This resource will enable UConn researchers and authors to publish certain of their works directly through the UConn library without having to transfer copyrights to publishers. This published works database may then be shared with other universities to create a large library of publications. The UConn library has agreed to work with CHIP on many of the copyright issues associated with CHIP’s goals, and is involving as CHIP a partner in the “knowledge repository” project.

**Preliminary CHIP Expansion and Technology Floor Plan**

Hillside Road Ground level exit/loading access



**6) Development of graduate academic programming in Health Communication and Health Information Technology**

CHIP is currently working with the Office of the Dean of the College of Liberal Arts and Sciences to plan for creation of an interdisciplinary graduate field of study (masters and Ph.D.-level) in health communication, health behavior change, and health information technology (informatics and information design). The technology initiatives described above will contribute directly to strengthening capacity at the University of Connecticut to provide cutting-edge research opportunities for graduate students pursuing multi- and

interdisciplinary education in this area. Health Communication and Health Information Technology are career specialties in high demand in industry, and there are currently few academic programs nationally that serve this need, particularly that can combine a fully interdisciplinary academic education in health behavior change with hands-on training in technology and involvement in cutting-edge research.

## **19. Multidisciplinary Lecture Series**

CHIP has organized two lecture series for the purpose of identifying and bringing together researchers from diverse academic fields with interests in health behavior change, and health behavioral change intervention research. These series have been highly successful and have been ongoing for several years. The presentations provide opportunities for CHIP affiliates to learn about the latest developments in their own and related fields, and to meet together informally for discussion.

The two lecture series are the *CHIP Lecture Series* and the *International Lecture Series on HIV Intervention and Prevention and Medical Adherence to ART*. The 2004-05 *CHIP Lecture Series* was sponsored, in part, by a gift from Boehringer Ingelheim. (For a list of presentations during the current reporting year, please see Appendix G.)

The *CHIP Lecture Series* provides a forum for CHIP investigators, affiliates, and research staff to hear presentations about new work in development by leading national figures in health behavior intervention and prevention, and to become familiar with work being conducted and published by others within the CHIP network as well as researchers at other nearby prestigious institutions. The series is well attended and is an invaluable forum for sharing late-breaking findings and trends in health behavior research. The *International Lecture Series on HIV Intervention and Prevention and Medical Adherence to ART* provides opportunities for CHIP affiliates and others at the University, and from the larger Connecticut health care community to hear talks by leading international figures in HIV/AIDS research and medical adherence on their recent findings and insights.

These series are planned and publicized by CHIP staff. Publicity for the events includes the posting of the Lecture series on the CHIP website, use of campus-wide email announcements and campus news articles, as well as published announcements. More personalized announcements and invitations are sent to affiliates and individuals identified as potential affiliates. Fliers and announcements are sent to affiliates, prospective affiliates, members of other research institutes and health clinics in Connecticut to cast as wide a net as possible for persons interested in the lectures. For those who respond by phone or email to the announcement, and/or who attend the lectures in person, CHIP follows up with additional contact, invitations to events, and meetings so that CHIP members can connect with the individuals to explore potential for research collaboration. A number of new affiliates and contacts have been identified through this process.

## **20. Objectives for Year Five (FY06)**

Looking ahead to the coming year, CHIP plans to continue to grow and excel as a multi- and interdisciplinary research center. In the first three years of its agreement with the University CHIP has been highly successful in achieving, and in some areas surpassing, its stated objectives. We will be staying with our proven formula for continued growth and research excellence in the coming year as we pursue expanded multi- and interdisciplinary aims.

Key among our goals for Year Five (FY06) are the following points:

### *Research Objectives*

- 1) Through our CHIP internal grants programs, mentoring, and technical support to PIs, we will continue to support development of new, highest quality, innovative, and timely proposals for externally funded research through CHIP by individual researchers and teams.
- 2) Through our CHIP research interest groups in key health domains we will share breaking insights and findings among affiliated UConn researchers to aggressively pursue new funding opportunities for cutting-edge, novel, interdisciplinary and fully collaborative projects that link the University of Connecticut with state health care organizations, health care providers, the community, and industry.
- 3) CHIP will continue to bring local and national researchers together on an on-going basis from a wide range of health and social science disciplines for lectures, events, and meetings at CHIP to promote cutting-edge, multidisciplinary exchange.
- 4) Chip will foster new, broadly-integrated, multi-layered and multidisciplinary work in the core problem area of HIV/AIDS (e.g., research that integrates HIV prevention, and medical adherence with the mental health, nursing, and dietary needs of HIV positive patients).
- 5) CHIP will expand its technology capacity, and capitalize on new technology innovations, to efficiently link CHIP affiliates with resources at CHIP and to connect CHIP investigators with colleagues across the State of Connecticut and throughout the world for late-breaking, top-level research collaboration in health behavior change.
- 6) CHIP will expand its work to improve translation of behavior change research into clinical and community practice in the US and internationally.

### *Administrative Objectives:*

- 1) CHIP will continue to provide administrative support and grants management in a multidisciplinary environment with the goal of obtaining and retaining grants that are eligible for funding based on requirements from the University and the sponsors.



- 2) CHIP will develop a new mentoring seminar series for graduate students and interested faculty who need to learn more about the grant preparation and submission process for securing internal and external funding opportunities.
- 3) CHIP will provide PIs with timely refresher sessions on new budget developments, budget projections, University policies, and grant guidelines as they become available. CHIP PIs will be quickly advised on changes to rules affecting allowable expenses, effort and reporting requirements, and other matters related to budget management and reporting.

## Appendix A: Announcement: CHIP Research Grants for PIs



CENTER FOR HEALTH/HIV  
INTERVENTION AND PREVENTION

M E M O

December 1, 2004

To: CHIP Principal Investigators  
From: Jeff Fisher  
Date: 12/01/04

**Re: Grant Development Opportunities for CHIP Principal Investigators** (Individuals with external grants through CHIP or submitted through CHIP)

Dear CHIP Principal Investigators,

As per procedures established last year, I again invite CHIP principal investigators to apply for CHIP Research Investment Funds to develop new research initiatives through CHIP.

Established PIs with grants through CHIP may apply for funds to support new research development efforts and pilot work that will lead to future external grant applications to be submitted through CHIP in the areas of health behavior change and health risk prevention. In the established PI category, consistent with discussions with Skip Lowe, Head of the Department of Psychology, funds will be distributed based on several criteria:

- the scientific merit of the research plan based on internal and external reviews
- the completed project's likelihood to elicit external funding
- the importance of the research question
- the extent to which the project is novel or innovative, especially proposals that are testing new methodologies and/or theories that are in need of pilot data
- composition of the research team (preference will be given to multidisciplinary work)
- relevance of the work to the mission of CHIP
- preference may be given to projects that demonstrate collaboration with community-based organizations

In addition, we will also consider a) where the PI is in his/her funding cycle (e.g., at the start of a large grant vs. at the end), and (b) the track record of the PI in realizing outcomes (e.g. external grants) from his or her previous CHIP research capital.

CHIP Principal investigators seeking to apply for these funds may submit applications to the Director of CHIP, Jeffrey D. Fisher Ph.D., to receive research investment monies for new research development and grant submission. This year funding is available for several projects that will lead to new grant applications to be submitted for external funds. Guidelines for submission of proposals for research investment capital funds are listed below.

### *Guidelines for submission of research development proposals*

- 1) Applications for receipt of research investment funds must be for work that will assist markedly in the submission of new substantial, external grant applications by a specified target date.

Center for Health /HIV  
Intervention & Prevention  
Department of Psychology  
University of Connecticut  
College of Liberal Arts and Sciences  
An Equal Opportunity Employer



University of Connecticut

2006 Hillside Road Unit 1248  
Storrs, Connecticut 06269-1248  
Telephone: (860) 486-4940  
Facsimile: (860) 486-4876  
[jfisher@uconnvm.uconn.edu](mailto:jfisher@uconnvm.uconn.edu)  
<http://psych.uconn.edu/chip.html>

2) **Application:** The scope of the work, its contribution to the field, and its potential interest to a particular funding agency should be described in the application. Proposals should be modeled after the U. S. Department of Health and Human Services' PHS 398 (<http://grants1.nih.gov/grants/funding/phs398/phs398.html>). Thus, proposals should include:

1. Face page
2. Description, performance sites, and key personnel.
3. Research grant table of contents
4. Detailed budget
5. Biographical sketch of the investigator and other key personnel
6. References
7. Research plan (maximum 10 pages, not including reference list)
  - a. Specific aims
  - b. Background and significance
  - c. Research design/method/data analysis
  - d. Information on how this research will be used to acquire external funding (e.g. type of award), and why this preliminary research assists the investigator's ability to receive external funding).
8. Pending or approved protocol number from the Institutional Review Board (IRB) and copy of IRB protocol and/or approval letter.
9. Format: Times New Roman, font size 12, and 1-inch margins.

Appendices are neither required, nor encouraged, and should not be used to circumvent the 10-page description limit. Submit your application to CHIP, to the attention of **Jody Flanagan** [jody.flanagan@uconn.edu](mailto:jody.flanagan@uconn.edu). Applications should be submitted by **January 14, 2005**.

- 4) There should be a line item budget for all costs involved, which should normally be for pilot research, staff, participant and travel costs, and other costs associated with grant development and submission, and only infrequently for equipment.
- 5) Applications must be predominantly the work of the CHIP PI, and for the benefit of the CHIP PI's own research program.
- 6) Please include with your proposal the names of two external reviewers (from outside the University of Connecticut) and two internal reviewers whose expertise would be relevant to review your proposal. Only one internal reviewer may be affiliated with CHIP.
- 7) If you intend to apply, please send a brief letter of intent by **December 15, 2004**, that includes an overview of your project and a preliminary estimated total cost to the attention of **Jody Flanagan** at [jody.flanagan@uconn.edu](mailto:jody.flanagan@uconn.edu).

Please contact me if you have questions regarding this opportunity.

Jeffrey D. Fisher, Ph.D.  
Director, Center for Health/HIV Intervention and Prevention



University of Connecticut

## Appendix B: Announcement: CHIP Seed Grant Competition/New Investigators



M E M O

December 1, 2004

To: CHIP Affiliates and Colleagues  
From: Jeff Fisher  
Date: 12/1/04  
Re: **CHIP “Seed Grant” development opportunities** (for individuals who have not previously received significant external funding in the health behavior change domain.)

Dear CHIP Affiliates and Colleagues,

We want to inform you of an opportunity for research development. The Center for Health/HIV Intervention and Prevention (CHIP) wishes to support new research development efforts and pilot work that will lead to future grant applications submitted through CHIP in the areas of health behavior change and health risk prevention. *Seed grants are for individuals who have not previously received significant external funding in the health behavior change domain.*

This year funding is available for one or more “seed grants” to facilitate pilot work or development of new grant applications to be submitted for external funds. Guidelines for distribution of research investment funds are listed below. Preference will be given for multidisciplinary work.

- 1) Applications for receipt of research investment funds must be for work that will assist markedly in the submission of new, substantial, external grant applications by a specified target date.
- 2) **Application:** The scope of the work, its contribution to the field, and its potential interest to a particular funding agency should be described in the application. Proposals should be modeled after the U. S. Department of Health and Human Services’ PHS 398 (<http://grants1.nih.gov/grants/funding/phs398/phs398.html>). Thus, proposals should include:

1. Face page
2. Description, performance sites, and key personnel
3. Research grant table of contents
4. Detailed budget (less than \$7,500)
5. Biographical sketch of the investigator and other key personnel
6. References
7. Research plan (maximum 10 pages, not including reference list)
  - a. Specific aims
  - b. Background and significance
  - c. Research design/method/data analysis
  - d. Information on how this research will be used to acquire external funding (e.g., type of award) and why this preliminary research assists the investigator’s ability to receive external funding).

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8. Pending or approved protocol number from the Institutional Review Board (IRB) and copy of IRB protocol and/or approval letter.
9. Format: Times New Roman, font size 12, and 1-inch margins.

Appendices are neither required, nor encouraged, and should not be used to circumvent the 10-page description limit. Please submit your application to CHIP, to the attention of **Jody Flanagan** at [jodi.flanagan@uconn.edu](mailto:jodi.flanagan@uconn.edu). Applications should be submitted by **January 14, 2005**.

- 3) There should be a line item budget for all costs involved, which should normally be for pilot research, staff, participant and travel costs, and other costs associated with grant development and submission, and only infrequently for equipment.
- 4) Please include with your proposal the names of two external reviewers (from outside the University of Connecticut) and two internal reviewers whose expertise would be relevant to review your proposal. Only one internal reviewer may be affiliated with CHIP.
- 5) Applications must be predominantly the work of the CHIP PI, and for the benefit of the CHIP PI's own research program.
- 6) If you intend to apply, please send a brief letter of intent by **December 15, 2004**, that includes an overview of your project and a preliminary estimated total cost to the attention of **Jody Flanagan** at [jody.flanagan@uconn.edu](mailto:jody.flanagan@uconn.edu).

Priority for funding will be based on:

- the scientific merit of the research plan
- completed project's likelihood to elicit external funding
- the importance of the research question
- the extent to which the project is novel or innovative, especially proposals that are testing new methodologies and/or theories that are in need of pilot data
- composition of the research team (e.g., cross-disciplinary)
- relevance to the mission of CHIP
- preference may be given to projects that demonstrate collaboration with community-based organizations

Please contact me if you have any questions regarding this opportunity.

Jeffrey D. Fisher, Ph.D.  
Director, Center for Health/HIV Intervention and Prevention  
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## Appendix C: Announcement: CHIP Multidisciplinary Graduate Student Support



M E M O

December 1, 2004

To: CHIP Affiliates and University Colleagues  
From: Jeff Fisher  
Date: 12/01/04

**Re: Multidisciplinary Graduate Student Support**

Dear CHIP Affiliates and University Colleagues,

The Center for Health/HIV Intervention and Prevention (CHIP) would like to inform you of an opportunity for research development. CHIP investment capital is available this year to fund a graduate student from one discipline to work on a research project relevant to CHIP's mission with a mentor who is a CHIP Ph.D. in another discipline. The maximum award would be for a 10 hours per week/RA for one semester. No more than one award can be made. The purpose of the multidisciplinary graduate student funds is to foster development of new research at the University of Connecticut that occurs at the juncture of two or more disciplines related to health behavior change, or health risk behavior.

We are requesting statements of interest from faculty at this time that can be of two types:

**1) A request for funding for a graduate student from a discipline that differs from yours to assist with development of a project which is likely to be submitted for outside funding.**

a) This application should consist of a description of a project, or pilot work, proposed or under development, to which a graduate student from another discipline could contribute meaningfully in the preparation of work associated with a proposal being submitted to an external agency. The scope of the work, its contribution to the field, and the importance of the graduate student's multidisciplinary contribution toward development of the project should be described in this document, which can be up to seven pages long, not including the reference list. Appendices are neither required nor encouraged, and should not be used to circumvent the 7-page description limit.

b) Be sure to include a project abstract as well as method, procedure, and reference sections. Please follow NIMH guidelines for general organization, margins and font sizes. Submit your application to CHIP, to the attention of **Jody Flanagan** [jody.flanagan@uconn.edu](mailto:jody.flanagan@uconn.edu). Applications should be submitted by **January 14, 2005**.

**c) There should be a line item budget that indicates the hours, time frame, and student stipend being requested.**

d) If you intend to apply for multidisciplinary graduate student funds, please send a brief letter of intent that includes a preliminary estimated total cost, by **December 15, 2004** to the attention of Jody Flanagan at [jody.flanagan@uconn.edu](mailto:jody.flanagan@uconn.edu).

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**2) A letter of nomination for a graduate student from your department to participate in multidisciplinary research related to health behavior change, or health risk behavior, with a CHIP faculty investigator from another discipline.**

a) Please nominate a student from your area that you believe has the skill and maturity to contribute to development of multidisciplinary research on health behavior change. If funded the students will be linked to a CHIP principal investigator from another discipline and the two will work together on the proposed research.

b) Along with your letter, please include a current CV for the student and reasons why you believe the student would be able to make a strong contribution to multidisciplinary health behavior research.

c) If you intend to nominate a student, please send a brief letter of intent to that effect by **December 15, 2004** to the attention of Jody Flanagan at [jody.flanagan@uconn.edu](mailto:jody.flanagan@uconn.edu).

If you have questions regarding this opportunity, please contact me.

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University of Connecticut

**Appendix D: Announcement: CHIP Pilot Project Support for Graduate Students**



M E M O

December 1, 2004

To: CHIP Affiliates and University Colleagues  
From: Jeff Fisher  
Date: 12/01/04

**Re: Pilot Projects in Health Intervention and Prevention Research for Graduate Students**  
Center for Health/HIV Intervention & Prevention (CHIP)

**Deadlines**

Letter of Intent Deadline: December 15, 2004  
Submission Date: January 14, 2005  
Funding Date: March 30, 2004

**Purpose**

To allow CHIP-affiliated graduate students to conduct preliminary research in any health area related to the overarching goal of the Center for Health/HIV Intervention & Prevention (i.e., to study the dynamics of health risk behavior and processes of health behavioral change in individuals and targeted at-risk populations). Priority will be given to promising research that is likely to be developed into a larger study and garner external funding.

**Eligibility**

Graduate students affiliated with CHIP are invited to apply for an award. Affiliated students are individuals who are students of CHIP Affiliates. Students must be enrolled in a program leading to a research doctorate such as the Ph.D. at the University of Connecticut.

**Allowable costs**

Funds may be used to support routine research-related expenses (but not the investigator's salary) such as payment of participants, copying of research material (e.g., questionnaires, consent forms), specialized equipment (e.g., microcassette recorder/transcriber), or paying research assistants with specialized skills necessary for the proposed project (e.g., fluency in Spanish). Funds may not be used to support travel to conferences, routine office equipment (e.g., computers), or student tuition and/or fees.

**Letter of Intent**

Prior to submitting proposals, investigators should submit a letter of intent providing a descriptive title of the proposed project, a short abstract (maximum of 250 words), the research area (e.g., nutrition, communication, psychology), an estimated total cost for the project, and the name, phone number, e-mail address, and mailing address of the student investigator proposing the work and his or her CHIP-affiliated sponsor.

Letters of intent, as well as final proposals, should be sent to **Jody Flanagan** at [jody.flanagan@uconn.edu](mailto:jody.flanagan@uconn.edu).

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### **Application**

Proposals should be modeled after the U. S. Department of Health and Human Services' PHS 398 (<http://grants1.nih.gov/grants/funding/phs398/phs398.html>). Thus, proposals should include:

1. Face page
2. Description, performance sites, and key personnel.
3. Research grant table of contents
4. Detailed budget (not to exceed 2 pages or \$1,500).
5. Biographical sketch of the student and other key personnel
6. References
7. Research plan (maximum 5 pages, not including reference list)
  - a. Specific aims
  - b. Background and significance
  - c. Research design/method/data analysis
  - d. Information on how this research will ultimately be used to acquire external funding (e.g., type of award such as NRSA proposal, and why this preliminary research assists the investigator's ability to receive external funding).
8. Pending or approved protocol number from the Institutional Review Board (IRB) and copy of IRB protocol and/or approval letter.
9. Format: Times New Roman or Courier, font size 12, and 1-inch margins.

### **Review Process**

Students will be given an opportunity to participate in the funding review process. In this context they will be mentored by faculty with prior reviewing experience. The review committee will be composed of the following individuals:

- Four CHIP graduate students (2 who are recipients of previous external grant funding and 2 without previous grant funding)
- Two CHIP-affiliated post-docs
- Two CHIP PIs

Funding will be awarded based on:

- the scientific merit of the research plan
- completed project's likelihood to elicit external funding
- the importance of the research question
- the extent to which the project is novel or innovative, especially proposals that are testing new methodologies and/or theories that are in need of pilot data
- composition of the research team (e.g., cross-disciplinary)
- relevance to the mission of CHIP

If funds are not expended within a given year, they may not be available to support this program a subsequent year.

Please contact me if you have any questions regarding this opportunity.

Jeffrey D. Fisher, Ph.D., Director, CHIP



University of Connecticut

## **Appendix E: Announcement: CHIP Conference Support**



M E M O

December 1, 2004

To: CHIP Affiliates and Colleagues  
From: Jeff Fisher  
Date: 12/01/04

**Re: Conference Proposals**

Dear CHIP Affiliates and Colleagues,

Again this year, CHIP would like to request from CHIP Affiliates and Colleagues proposals for conferences that could be convened at CHIP for the purpose of stimulating innovative, multidisciplinary and/or multi-institutional collaboration in research related to the mission of CHIP. CHIP plans to allocate funds for up to two small conferences in the coming year, the purpose of which will be invite key national and international researchers to come together at CHIP at the University of Connecticut to share recent work in new, under-explored areas of one discipline, or at the intersection of disciplines. Conference themes should be in areas that can lead to new, multidisciplinary and/or multi-institutional project development, as well as to new scholarship in the area of health behavior change, and ultimately, new grant applications submitted through CHIP.

*Guidelines for submission of conference proposals*

- 1) Applications for conference development funds should demonstrate how the meeting may lead to significant new research collaboration and scholarship relevant to CHIP's Mission.
- 2) The topic of the conference, the key participants and research questions to be explored, contribution of the meeting to the field (or fields) of interest, scholarship goals, and potential for new collaborative endeavors should be described in the application, which can be up to ten pages long (not including references). Please indicate conference organizers, keynote individuals, the number of invitees planned to be invited, prospective dates for the meeting, partnering institutions, and other funding sources being pursued. Applications should be submitted by **January 14, 2005**, to the attention of **Jody Flanagan** at [jody.flanagan@uconn.edu](mailto:jody.flanagan@uconn.edu).
- 3) There should be a line item budget for all costs involved, which should normally be for organizational costs, travel, and other costs associated with conference planning, development, and implementation of the conference itself. Please note that preference will be given for funding proposals which involve cost sharing with other individuals or entities (i.e. CHIP pays only part of the cost of the conference, which has received commitments of support from others, as well.)
- 4) Please include with your proposal the names of two external reviewers (from outside the University of Connecticut) and two internal reviewers whose expertise would be relevant to review your proposal. Only one internal reviewer may be affiliated with CHIP.

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- 5) If you intend to apply for conference development funds, please send a brief letter of intent that includes an estimated total cost, by **December 15, 2004** to the attention of **Jody Flanagan** at [jody.flanagan@uconn.edu](mailto:jody.flanagan@uconn.edu).

If you have questions regarding this opportunity, please contact me.

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University of Connecticut

## Appendix F: Announcement: CHIP Reviews to Help with Grant Development



M E M O

December 1, 2004

To: CHIP Affiliates and Colleagues  
From: Jeff Fisher  
Date: 12/01/04

**Re: CHIP Assistance with Reviews to Help with Grant Development** (for individuals planning to submit external grants through CHIP)

Dear CHIP Affiliates and Colleagues,

I am pleased to announce a new opportunity for research development support through CHIP. Investigators who are in the process of preparing grant proposals for submission to external funding agencies may now apply to CHIP for an internal review of the grant by one or more experienced CHIP investigators prior to submission of the grant to the external agency. If CHIP does not have sufficient expertise "in house," you may suggest other experts who could provide a helpful review (e.g., former members of an NIMH review panel), and CHIP will pay them an honorarium for their review. The purpose of this procedure is to give investigators the opportunity to have their proposal reviewed by seasoned CHIP investigators or others with extensive experience in successful grant writing and grant review for federal agencies, or other large funding entities.

*Guidelines for application to CHIP for internal review of proposals*

- 1) Individuals wishing to apply for internal review of an external grant proposal should contact the Director of CHIP by letter at least 2 months prior to the submission date for the grant. This permits the Director to select, notify, and obtain consent and a review from a qualified reviewer.

The letter should be accompanied by an abstract, and a brief description of the project that addresses the scope of the work, its anticipated contribution to the field, and its interest to a particular funding agency. The letter should also indicate key personnel and collaborators on the grant.

- 2) Proposals being submitted for CHIP review should be more or less completely written and in the final format required by the funding agency prior to submission to CHIP for review. Investigators should be prepared to submit this finished draft to CHIP a full month before the final submission date posted by the funding agency.

Please include with your proposal the names of two internal reviewers and possibly two external reviewers whose expertise would be relevant to review your proposal.

Please contact me if you have questions regarding this opportunity.

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Please include with your proposal the names of two internal reviewers and possibly two external reviewers whose expertise would be relevant to review your proposal.

Please contact me if you have questions regarding this opportunity.

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**CHIP Lecture Series Speakers, September 9, 2004 – June 1, 2005**

The 2004-2005 *CHIP Brown Bag Lecture Series* was sponsored, in part, by Boehringer Ingelheim.

<b>Date</b>	<b>Speaker</b>	<b>Title / Topic</b>
9 Sept 2004	<b>Merrill Singer</b> <i>Hispanic Health Council, Hartford</i>	"Intimate Partner Violence: Drug Use and HIV Risk Among Women in Hartford"
23 Sept 2004	<b>Wendee Wechsberg</b> <i>Research Triangle Institute, North Carolina</i>	"Translating US Research to South Africa with Cultural & Ethical Considerations: Learning Lessons from the Woman-focused HIV Prevention Project"
30 Sept 2004	<b>Kathy Sikkema</b> <i>Yale School of Medicine, Yale University</i>	"Community-Level HIV Prevention Trials: Behavioral Outcomes Among Adolescents"
14 Oct 2004	<b>Rafael Pérez-Escamilla</b> <i>Department of Nutritional Sciences, UConn</i>	"The Vertical Transmission of HIV through Breast Milk in Sub-Saharan Africa: A Public Health Quagmire"
21 Oct 2004	<b>Jean Rhodes</b> <i>Univ. of Massachusetts, Boston</i>	"Older and Wiser: Mentoring Relationships and Adolescent Health"
28 Oct 2004	<b>Richard Wolitski</b> <i>CDC, Atlanta</i>	"Does Sexual Explicitness Influence the Effectiveness of HIV Prevention Messages for Adult Gay and Bisexual Men?"
4 Nov 2004	<b>Jane Simoni</b> <i>University of Washington</i>	"Assessing and Enhancing Antiretroviral Adherence: A Riddle Wrapped in a Mystery Inside an Enigma"
11 Nov 2004	<b>Khamis Abu-Hassaballah</b> <i>UConn Health Center, Farmington</i>	"Medical Informatics: Promises and Pitfalls of New Technologies for Behavioral Research"
9 Dec 2004	<b>Dolores Albarracín</b> <i>University of Florida</i>	"A Test of Major Assumptions About Behavior Change: A Comprehensive Look at HIV Prevention Since the Beginning of the Epidemic"
27 Jan 2005	<b>Robert Broadhead</b> <i>Department of Sociology, UConn</i>	"Improving the Peer-driven Intervention Model to Prevent HIV Among Injection Drug Users in Russia"
3 Feb 2005	<b>Jean Schensul</b> <i>(ICR) Institute for Community Research, Hartford</i>	"Ecstasy and Social Risk Among Urban Youth"
17 Feb 2005	<b>Robert Fulilove</b> <i>Columbia University</i>	"Health Disparities and the HIV Pandemic"
3 Mar 2005	<b>Loretta Sweet Jemmott</b> <i>University of Pennsylvania</i>	"Designing Effective Culturally Competent Health Promotion Intervention Models"
17 Mar 2005	<b>Jill Lewis</b> <i>Hampshire College</i>	"Challenging Gender Issues: Centering the Gender Factor in HIV/AIDS Prevention"
31 Mar 2005	<b>Kaveh Khoshnood</b> <i>Yale School of Public Health, Yale University</i>	"Ethical Issues in Research Studies with Illicit Drug Users"

14 Apr 2005	<b>Xiushi Yang</b> <i>Old Dominion University</i>	“Migration, Gender, and HIV/STD Risk in Contemporary China”
21 Apr 2005	<b>Julie Wagner</b> <i>UConn Health Center, Farmington</i>	“Behavioral and Psychosocial Aspects of Diabetes”
28 Apr 2005	<b>Margaret Chesney</b> <i>NCCAM</i>	“Health Behaviors and Outcomes: Positive Lessons and New Directions”
12 May 2005	<b>Frederick Altice</b> <i>Yale School of Medicine, Yale University</i>	“Rethinking Directly Administered Antiretroviral Therapy: Lessons Learned and Future Directions”

### **CHIP International HIV Lecture Series**

Speakers for CHIP International Lecture Series, Spring 2005

The 2004-2005 *CHIP International Series* was sponsored, in part, by Boehringer Ingelheim.

<b>Date</b>	<b>Speaker</b>	<b>Title / Topic</b>
24 Mar 2005	<b>Susan Pick</b> <i>Mexican Institute of Family and Population Research</i>	“Quietly Working for Sexuality Education in Mexico: Strategies for Advocacy”
26 May 2005	<b>Lorraine Scherr</b> <i>Royal Free and University College Medical School, London</i>	“HIV Prevention – A Critical Overview” – Rescheduled to Fall 05

**Appendix H: CHIP Active Grants FY05** (July 1, 2004 – June 30, 2005)

Principal Investigator	Dep	FY05 Direct Costs Awarded	F&A Awarded FY05	FY05 Total Costs Awarded	# of Yrs in Proj	Start	End	Agency	Title
Broadhead, Robert S.	SO	\$113,876	\$9,110	\$122,986	5	9/1/04	8/31/09	NIH/NIDA	Global Expansion of Peer-Driven Interventions
Broadhead, Robert S.	SO	\$250,000	\$76,800	\$326,800	4	9/25/02	6/30/06	NIH/NIDA	Preventing HIV Among IDUs in Yaroslavl Russia
Broadhead, Robert S.	SO	\$52,083	\$5,979	\$58,062	2	9/1/04	6/30/06	NIH/NIDA	Preventing HIV Among IDUs in Yaroslavl Russia (Supplement)
Copenhaver, Michael M.	PS	\$124,480	\$9,718	\$134,198	4	9/30/03	9/29/07	NIH/NIDA	Optimizing HIV Risk Reduction for HIV Positive IDUs
Copenhaver, Michael M.	PS	\$24,572	\$3,686	\$28,258	3	7/1/02	6/30/05	CT DoPH	Harm Reduction HIV Prevention Intervention (CT Department of Public Health subcontract)
Cornman, Deborah	PS	\$133,333	\$26,667	\$160,000	2	7/1/03	6/30/05	New York State Dept. of Health AIDS Instit	Translation of Options/Opciones Intervention into Standard of Care
Cornman, Deborah	PS	\$37,900	\$5,685	\$43,585	3	4/1/03	3/31/06	Conn Dept of Public Health	Capacity Building Assistance to HIV Prevention Program
Cornman, Deborah H.	PS	\$79,877	\$38,341	\$118,218	2	10/1/04	9/30/06	MedCases, Inc./NIH/SBIR Phase II	Internet-Based Program to Train Clinicians in HIV Prevention Counseling, Phase II



**Appendix H: CHIP Active Grants FY05** (July 1, 2004 – June 30, 2005)

Continued

Principal Investigator	Dep	FY05 Direct Costs Awarded	F&A Awarded FY05	FY05 Total Costs Awarded	# of Yrs in Proj	Start End	Agency	Title	Principal Investigator
Erickson, Pamela	AN	\$402,099	\$77,942	\$480,041	5	9/30/03	9/29/08	CDC	Preventing Sexual Risk Among Ethnic Minority Youth
Fisher, Jeffrey	PS	No Cost Extension Year			5	7/15/99	6/30/05	NIH/NIMH	Physician-Delivered Intervention for HIV+ Individuals
Fisher, Jeffrey	PS	\$943,925	\$365,798	\$1,309,723	4	9/19/03	6/30/07	NIH/NIMH	Changing ART Adherence Behavior
Harman, Jennifer J. (B.T. Johnson, Faculty Sponsor)	PS	\$31,858	\$0	\$31,858	2	8/1/03	7/31/05	NIMH/NR SA	A Relationship-Oriented Model of HIV Risk Behavior
Johnson, Blair T.	PS	\$313,916	\$150,680	\$464,596	5	12/1/02	11/30/07	NIH/NIMH	Syntheses of HIV Risk Reduction Research (R01 MH58563)
Kalichman, Seth C.	PS	\$486,060	\$95,467	\$581,527	4	6/12/01	5/31/06	NIH/NIMH	Intervention to Close Digital Divide in AIDS Care
Kalichman, Seth C.	PS	\$250,000	\$60,427	\$310,427	3	4/1/04	3/31/07	NIH/NIAA A	Alcohol and HIV Risk Reduction in South Africa
Kalichman, Seth C.	PS	\$385,808	\$115,373	\$501,181	4	8/1/04	7/31/08	NIH/NIMH	Gender Violence and HIV Risk Reduction in South Africa
Kiene, Susan M. (J.D. Fisher, Faculty Sponsor)	PS	\$31,233	\$0	\$31,233	3	7/1/04	6/30/07	NIH/NIMH	Dynamics of HIV Risk Behavior: A Daily Process Approach

**Appendix H: CHIP Active Grants FY05** (July 1, 2004 – June 30, 2005)

Continued

Principal Investigator	Dep	FY05 Direct Costs Awarded	F&A Awarded FY05	FY05 Total Costs Awarded	# of Yrs in Proj	Start End	Agency	Title	Principal Investigator
Kiene, Susan M. (J.D. Fisher, Faculty Sponsor)	PS	\$1,000	\$0	\$1,000	1	10/1/04	12/31/04	SPSSI	Stress & Negative Affect: A Daily Process Study of HIV Risk Behavior
Marsh, Kerry L.	PS	\$150,000	\$64,500	\$214,500	4	4/1/01	3/31/05	NIH/NIMH	Implicit Attitudes and HIV Risk Behavior
Miller, T., Fisher, J., Jarrin, O.	AH	\$10,000	\$0	\$10,000	6	7/1/04	12/31/04	Conn Dept of Public Health	In Support of Adherence to HIV/AIDS Medications for Clients Living with HIV
Osborn, Chandra (J.D. Fisher, Faculty Sponsor)	PS	\$37,912	\$0	\$37,912	3	6/1/04	5/31/07	NIH/NRSA	A Brief Intervention to Improve Diabetes Control
Park, Crystal	PS	\$14,510	\$0	\$14,510	1	9/20/04	12/19/05	APA (co-sponsored by CHIP)	Conference on "Health Psychology Perspectives on Positive Life Changes Following Illness"
Kalichman, Seth	PS	\$2,494,859	\$630,819	\$3,125,678	5	4/1/05	3/31/10	NIMH	Brief HIV Prevention Counseling in South Africa (Multisite)
<b>Total Active Grant Awards</b>		<b>\$6,369,301</b>	<b>\$1,736,992</b>	<b>\$8,106,293</b>					

**Award made directly to our Grad Students FY05**  
**(July 1, 2004 – June 30, 2005)**  
**Continued**

Kiene, Susan	PS	\$2,000	\$0	\$2,000				APA	Stress and negative affect: A daily process study of HIV-risk behavior among HIV-positive individuals in South Africa
Osborn, Chandra	PS	\$1,000	\$0	\$1,000				APA	dissertation award
<b>Total Awards</b>		<b>\$3,000</b>	<b>\$0</b>	<b>\$3,000</b>					

**Appendix I: CHIP Submitted Proposals FY05** (July 1, 2004 – June 30, 2005)

Principal Investigator	Dep	Direct Costs Requested	F&As Requested	Total Costs Requested	No. of Yrs in Project Period	Start	End	Agency	Title
Barta, William	PS	\$275,000	\$128,218	\$403,218	2	4/1/05	3/31/07	NIH	Alcohol-involved sexual risk behavior among HIV+ persons
Barta, William	PS	\$275,000	\$122,832	\$397,832	2	1/1/06	12/31/08	NIH	Alcohol-involved sexual risk behavior among HIV+ persons (revision)
Buck, Ross	CS	\$550,000	\$261,120	\$811,120	3	12/1/05	11/30/08	NIH/ NICHD	Emotion and Reason in Decision Making about Safe Sex
Copenhaver, Michael	PS	\$122,847	\$21,679	\$144,526	3	7/1/05	6/30/08	CT DPH	The Enhanced AIDS Education Intervention for High Risk IDU's (renewal)
Copenhaver, Michael	PS	\$1,435,372	\$675,379	\$2,110,751	4	10/1/05	9/30/09	NIH/ NIDA	CBT to Prevent HIV Among Pregnant Drug Abusers in Treatment
Copenhaver, Michael	PS	\$275,000	\$127,968	\$402,968	2	12/1/05	11/30/07	NIH/ NIDA	CBT to Prevent HIV Among Pregnant Drug Abusers in Treatment (revision)
Cornman, Deborah H.	PS	\$236,487	\$113,513	\$350,000	1.5	7/1/05	12/31/06	CDC	Development of Training and Implementation Materials for Options Intervention
Cornman, Deborah H.	PS	\$152,027	\$72,973	\$225,000	2	10/1/04	9/30/06	MedCases, Inc./NIH/ SBIR Phase II	Internet-Based Program to Train Clinicians in HIV Prevention Counseling, Phase II
Cornman, Deborah H.	PS	\$160,383	\$32,077	\$192,460	1	4/1/05	3/31/06	NY State Dept of Health, AIDS Inst.	Translation of Options/Opciones Intervention into Standard of Care (renewal)

<b>Appendix I: CHIP Submitted Proposals FY05 (July 1, 2004 – June 30, 2005)</b>									
<b>Principal Investigator</b>	<b>Dep</b>	<b>Direct Costs Requested</b>	<b>F&amp;As Requested</b>	<b>Total Costs Requested</b>	<b>No. of Yrs in Project Period</b>	<b>Start</b>	<b>End</b>	<b>Agency</b>	<b>Title</b>
Kalichman, Seth * through CHIP in collaboration with Soc Psyc Div	PS	\$1,961,226	\$113,297	\$2,074,523	5	5/1/05	4/30/10	NIH/ NIMH	Training in Social Processes of HIV/AIDS
Kalichman, Seth	PS	\$2,494,859	\$630,819	\$3,125,678	5	4/1/05	3/31/10	NIMH	Brief HIV Prevention Counseling in South Africa (Multisite)
Kalichman, Seth	PS	\$2,493,750	\$630,287	\$3,124,037	5	4/1/05	3/32/10	NIMH	Brief HIV Prevention Counseling in South Africa (Multisite) (revision)
Neafsey, Patricia	N	\$750,000	\$289,593	\$1,039,593	3	7/1/05	6/30/08	NIH	Reducing Adverse Self-Medication Behaviors in Older Adults
Kaufman, Michelle (Seth Kalichman, faculty sponsor)	PS	\$150,107	\$0	\$150,107	3	6/1/05	5/31/08	NIH/ NIMH NRSA	Gender-Tailored HIV Intervention for South African Women
Portnoy, David (K Marsh, Faculty Sponsor)	PS	\$1,000	\$0	\$1,000	1	11/1/04	10/31/05	SSSS	Casual Sex Scripts: Destination Spring Break
Portnoy, David (Kerry Marsh, Faculty)	PS	\$1,000	\$0	\$1,000	1	2/1/05	1/31/06	SPSSI	Using Hypocrisy to Reduce Casual Sex Behavior of Students on Spring Break

Sponsor)									
<b>Appendix I: CHIP Submitted Proposals FY05 (July 1, 2004 – June 30, 2005)</b>									
<b>Principal Investigator</b>	<b>Dep</b>	<b>Direct Costs Requested</b>	<b>F&amp;As Requested</b>	<b>Total Costs Requested</b>	<b>No. of Yrs in Project Period</b>	<b>Start</b>	<b>End</b>	<b>Agency</b>	<b>Title</b>
Copenhaver, Michael M.	PS	\$128,151	\$10,252	\$138,403	4	4/1/04	3/31/07	NIH/ NIAAA	Alcohol and HIV Risk Reduction in South Africa
Johnson, Blair	PS	\$313,916	\$150,680	\$464,596	1	12/1/04	11/30/05	NIH	Syntheses of HIV Risk Reduction Research (Continuation for Year 03)
Kalichman, Seth	PS	\$250,000	\$60,427	\$310,427	3	4/1/04	3/31/07	NIH/ NIAAA	Alcohol and HIV Risk Reduction in South Africa
Miller, Thomas	AH	\$10,000	\$0	\$10,000	6 mos	7/1/04	12/31/04	Conn Dept of Public Health	Telehealth Intervention Project for HIV Adherence and Compliance
Pescatello, Linda	AH	\$2,485,261	\$1,300,072	\$3,785,333	5	4/1/06	3/31/11	NIH/ NHLBI	ACE Genotype & Exercise Adherence as Determinants of the Exercise Response
Snyder, Leslie w/ Fisher, Jeffrey	CS	\$2,820,162	\$1,037,058	\$3,857,220	3	9/1/05	8/31/08	CDC	Creating Center for Health Communication & Marketing
<b>TOTAL OF ALL PROPOSALS SUBMITTED FY 2005</b>		<b>\$12,539,171</b>	<b>\$4,139,392</b>	<b>\$16,678,563</b>					

\*For grants that were revised and resubmitted the original grant submission amount is noted but not used in the total calculation.

\*\* Grants that require competitive renewal submissions are noted but not calculated in the total amount.