

CDUHR news

Center for Drug Use and HIV Research

in the Institute for AIDS Research at National Development and Research Institutes, Inc.

“You want to integrate, synthesize and translate findings. It is critically important that findings from scientific studies be extracted and made usable, relevant and available for people in the field who need them.”

Richard Needle, Ph.D.,
Chief of the Community
Research Branch of NIDA.

Opening Seminar: An Introduction to the Center for Drug Use and HIV Research (CDUHR)

CDUHR marked its official opening with a seminar at the World Trade Center on September 28, 1998. Local researchers and community service providers learned about the structure, goals and research projects of the first socio-behavioral center for the study of drug use and HIV/AIDS. Participants were also invited to share their viewpoints in a discussion of emerging issues in a Town Hall-style meeting.

“The primary goal of this meeting is to make the local community of researchers and service providers, including our own advisory group, aware of the Center’s activities and of the Center as a resource,” said Sherry Deren, Ph.D., Center Director, in her opening comments. Dr. Deren emphasized dialog among researchers and service providers as the theme of the day.

Richard Needle, Ph.D., Chief of the Community Research Branch of the National Institute on Drug Abuse (NIDA), agreed with the importance of making information more accessible. In his keynote address, he stated that, “You want to integrate, synthesize and translate findings. It is critically important that findings from scientific studies be extracted and made usable, relevant and available for people in the field who need them.”

Henry Francis, M.D., Director of the Center on AIDS and Other Medical Consequences of Drug Abuse (CAMCODA) of NIDA, spoke about the importance of the Center’s theme, *HIV and High Risk Drug Use: Learning from the NYC Epidemic* in his keynote speech. “Drug use is in the process of becoming a major vector and international problem in the transmission of HIV and other blood-borne diseases. We are coming to the realization that if we do not have a ‘magic bullet’ to cure the virus, we must prevent it. In so doing, we have to deal with the behaviors and other issues of people who are at high risk.



(Pictured above, left to right) Henry Francis, M.D., Sherry Deren, Ph.D., Beatrice Krauss, Ph.D., and Richard Needle, Ph.D.

Fortunately, there seems to be an increased emphasis into looking to do something before the disease, as well as minimizing some of the complications after the disease already occurs.”

Following the opening remarks, Directors of the five cores of CDUHR outlined the aims of the cores: Administration and Coordination (Sherry Deren, Ph.D.), Project Development (Beatrice J. Krauss, Ph.D.), Methods Development and Data Analysis (Samuel R. Friedman, Ph.D.), Strategic National and International Comparisons (Don C. Des Jarlais, Ph.D.), and Training and Dissemination (Joseph Luniewicz who spoke for Andrew Osborne, M.S., CHES). The cores were developed to provide an infrastructure to support the ongoing projects in the Center by enhancing the efficiency of research conducted, disseminating findings and fostering new projects. Although each core has its own distinct mandate, the cores are designed to operate in an integrated manner to achieve Center aims. Project summaries, including preliminary findings, were presented by the Principal Investigators of the 12 current projects and demonstrated the diversity of the research being conducted in the Center (the projects are listed on page 8). *Continued next page.*

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(Pictured above, left to right) Henry Francis, M.D., Raquel Algarin, L.P.N., Mary Ann Chaisson, Dr. P.H., Ellie Schoenbaum, M.D.

One of the highlights of the event was a Town Hall Meeting on emerging trends in drug use and the HIV epidemic in New York City. The four panelists were Raquel Algarin, L.P.N. (Director of Harm Reduction Services at the Lower East Side Harm Reduction Center), Mary Ann Chaisson, Dr.P.H. (Assistant Commissioner of Disease Intervention Research, New York City Department of Health), Henry Francis, M.D., and Ellie Schoenbaum, M.D., (Director of the AIDS Research Program, Montefiore Medical Center). Audience members and panelists in this interactive session discussed areas of research and service needs.

Some of the topics identified for further study included:

- Heterosexual transmission, non-injecting drug use, women and their position in risk networks, local (neighborhood) networks and underserved populations: adolescents, young children, homeless, those in denial because of their belief that they are at low risk;
- Adherence to medication regimens including how to keep patients engaged in treatment, alternative treatments (e.g., acupuncture, yoga and massage) that are used by highly affected subpopulations, and the effects of new treatments on risk behavior;
- Methods of addressing general mistrust of government entities which may lead to resistance to treatment, and the low level of literacy and information access that contribute to fear and mistrust.

Future meetings, where research findings will continue to be shared and discussed with local researchers and service providers, are being planned.

CURRENT RESEARCH

In this section of the newsletter, information regarding current research projects will be featured. Summaries of two ongoing projects are presented in this issue.

“Although the rate of transition to injection use, particularly among former injectors, is lower than expected, given the large number of non-injecting heroin users in New York City, the current incidence of 15% is a cause for concern.”

Alan Neaigus, Ph.D.,
Principal Investigator

HIV Risk and Transitions from Non-injecting Heroin Use

Principal Investigator: Alan Neaigus, Ph.D.
Funding Agency: NIDA

Background

Non-injecting heroin users outnumber injection users among admissions to publicly funded drug treatment programs, according to a study of New York City drug use patterns.¹ The shift from injection to non-injection use over the past 10 years appears to be due to fear of contracting HIV and hepatitis, increased purity and availability of heroin, fear of needles, recreational use by first-time users who are generally initiated by sniffing the drug, and the perception that injection use is stigmatizing in ways that non-injecting use is not.²

Objectives

The study's four main objectives are to:

1) examine the extent to which non-injecting users transition to injecting, and to compare transitioning to injection use between those who have never injected and those who were former injectors; 2) identify the



(Pictured above, left to right) Alan Neaigus, Ph.D., Principal Investigator, Kristine Ziek, Follow-up Coordinator, Debra Hagen, Ph.D., Project Director.

factors that predict the transition from non-injection to injection use; 3) examine seroconversions for HIV, hepatitis B (HBV) and hepatitis C (HCV) for those who transition to injecting and those who do not, and the predictors of seroconversion; 4) describe sexual risk behavior and sexual risk networks of the non-injecting heroin user.

Subjects and Methods

In this ongoing study, 560 non-injecting heroin users have thus far been recruited from the Lower East Side of Manhattan in New York City. Over half (59%) of those interviewed at baseline have been followed for an average of 10 months (as of October 1998).

Preliminary Findings

Transitioning to injection use - There is a 15% incidence among non-injection users of transitioning to injection use, with no difference between former injectors and those who never injected.

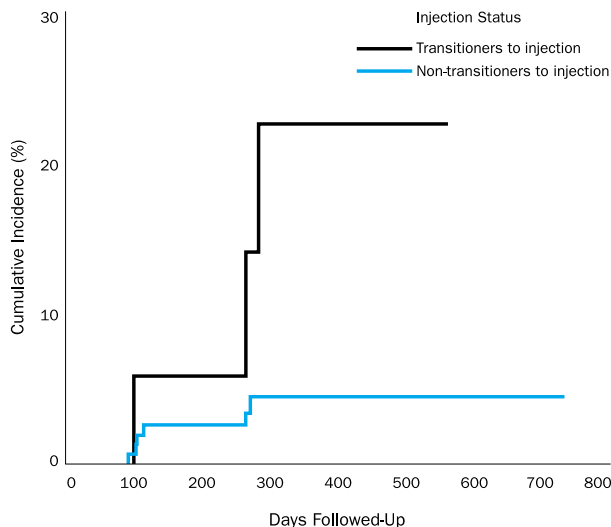
Risk factors for transitioning to injection use -

Non-injectors are at greater risk to transition when they have an injection user in their social network who encourages injection use, or if they have a casual sex partner who is an injection user. White users, younger users, those who use two or more bags of heroin a day, cocaine use of less than five years or no cocaine use, and those who sniff heroin and cocaine together (speedballing) are also more likely to transition to injection use.³

Seroconversions - Although there have been no HIV seroconversions during the average 10-month follow-up period, there has been a 9.2% incidence in acquiring HBV, and 6.2% incidence in acquiring HCV. There is no significant difference between transitioners to injection use and non-transitioners for HBV. However, for HCV, there is a significant difference between transitioners and non-transitioners, with the former acquiring HCV at a much higher rate than the latter (22.7% vs. 4.3% incidence, see graph).

Sexual behavior - In the initial baseline interview, 360 reported engaging in sex in the 30 days prior to the interview, with 19% of those reporting sex with more than one partner. Of the 360, 62% reported know-

Seroconversions for Hepatitis C and Injection Status of Heroin Users



(Pictured above, left to right) Gilbert Idefonso, Assistant Project Director; Peter Blasko, Interviewer; Marcia Morris, Consultant; Jesse DeJesus, Interviewer; and Cesar Valentin, Interviewer.

ingly having sex with high-risk partners (i.e., HIV seropositive or with AIDS, injection drug users, men who have sex with men or crack smokers) and, on 67% of those occasions, engaging in unprotected sex. Furthermore, HIV seronegative respondents were more likely to engage in unprotected sex with high-risk partners than HIV seropositive respondents.⁴

Implications

“Although the rate of transition to injection use, particularly among former injectors, is lower than expected, given the large number of non-injecting heroin users in New York City, the current incidence of 15% is a cause for concern. The high risk of seroconversion for hepatitis C, and potentially HIV, for transitioners requires interventions to prevent the onset of injecting drug use among those who are non-injecting heroin users” said Dr. Neaigus. In addition, it is critical to encourage HBV seronegative heroin users to obtain hepatitis B vaccinations, regardless of their usual mode of drug administration. There is also a continued need to stress the importance of increased condom use.

1. Community Epidemiology Work Group, National Institute on Drug Abuse (1998, June). Epidemiologic trends in drug abuse. Volume I: Highlights and executive summary. Presented at the CEWG Meeting, Boston, MA.
2. Neaigus, A., Atillasoy, A., Friedman, S.R., Andrade, X., Miller, M., Idefonso, G., & Des Jarlais, D.C. (1998). Trends in the noninjected use of heroin and factors associated with the transition to injecting. In J.A. Inciardi, & L.D. Harrison (Eds.), Heroin in the age of crack cocaine. Thousand Oaks, CA: Sage.
3. Neaigus, A., Hagen, D.L., Friedman, S.R., Miller, M., & Des Jarlais, D.C. (1998, November). Transitions to injecting drug use among non-injecting heroin users. Presented at the American Public Health Association Annual Meeting, Washington, DC.
4. Neaigus, A., Friedman, S.R., Miller, M., Hagen, D.L., & Des Jarlais, D.C. (1998, May). Sexual risk networks and HIV among non-injecting heroin users. Presented at the Combined 18th INSNA Sunbelt and 5th European International Social Networks Conference, Sitges, Spain.

For additional information on this study you may contact Alan Neaigus, Ph.D.- E-mail: alneaa@ix.netcom.com, Phone: 212-845-4480, Fax: 212-845-4698.

“This may be the first study that carefully calculates estimates of drug users and distributors from the members of the population who are not contacted through an institution. These techniques may be used to identify and gain access to a group in need of services and treatment.”

Rees Davis, Ph.D.,
Project Director of the
Estimating Current
Hard Drug Users and
Operatives Study

Estimating Current Hard Drug Users and Operatives

Principal Investigator: Bruce D. Johnson, Ph.D.
Funding Agency: NIDA

Background

Hard core drug users and distributors are considered to be “hard to reach” or hidden populations. Thus, obtaining an accurate estimation of these populations has been difficult to achieve. Determining their numbers and typology is of critical interest to researchers in HIV/AIDS since substance abusers may engage in high-risk behaviors that permit transmission of HIV and other diseases.

Objectives

This ongoing study will develop and test techniques to determine the number and composition of current users and distributors of heroin, powder cocaine or crack within a single urban community.

Subjects and Methods

The method of chain referral sampling, or “snowball” sampling, is often used to find hidden populations. It involves recruiting initial respondents who can name or refer others who fit the description of the group that is being sought. In turn, some of these persons will name others who they know.

In the “Estimating” study, initial contacts (drug users and distributors) provide the first name and/or street name of any person they know who uses and/or distributes heroin, powder cocaine or crack. They are prompted for demographic information on the person, the type(s) of drug(s) used or distributed, HIV status, location where the person is most often found, and the likelihood of recruiting the nominee to participate in the study. In addition, information is obtained regarding personal drug use and syringe sharing, and urine samples are collected for drug and HIV testing.^{1,2}



(Pictured above) Rees Davis, Ph.D., Project Director, Doris Randolph, M.A., Assistant Project Director, and Bruce D. Johnson, Ph.D., Principal Investigator.

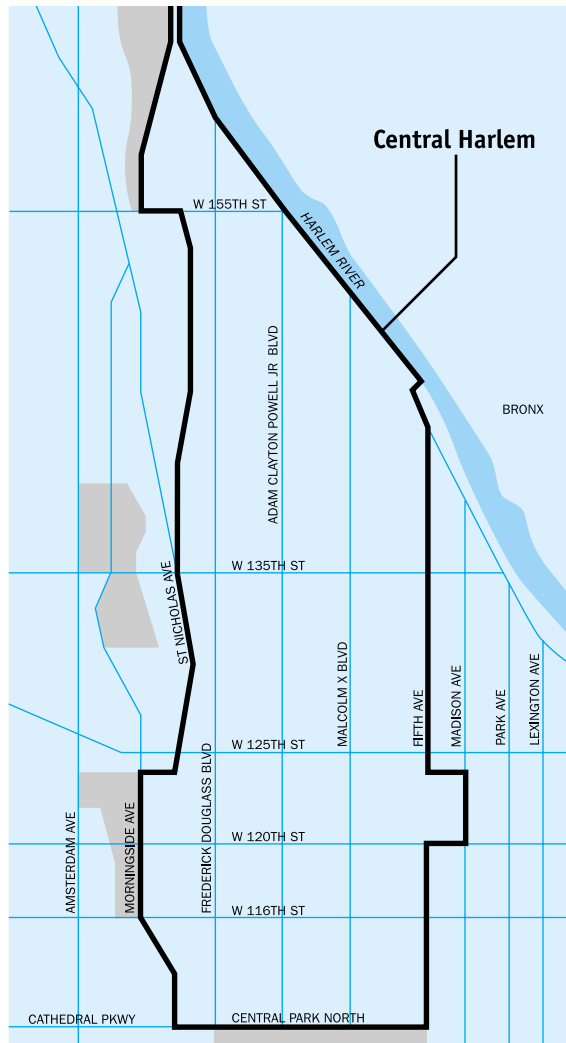
To date, over 260 of 600 targeted interviews have been conducted with users and distributors in Central Harlem. An additional 300 will be recruited in a section of the Bronx, New York City, in early 1999 to replicate the methods used in Central Harlem. Results from HIV tests are not yet available. HIV and drug tests will be compared with respondents’ self-reports on HIV status and drug use. In addition, HIV test results will be matched to determine the prevalence of HIV for heroin, powder cocaine and crack users.

Preliminary Findings

Pilot data indicate that respondents will nominate an average of 12 users and sellers of heroin, powder cocaine or crack. Willingness of initial respondents to nominate others is dependent on the trust gained by the interviewers who are known in the area. Fears of reprisal and retaliation prevent some respondents from naming others, particularly sellers. Many respondents know more users or sellers than they can nominate. This is most often due to either forgetting the person while being interviewed or not knowing the name of the user or seller. In general, distributors are a more cohesive social group than users. Chain referral sampling, especially in the later waves, appears to have uncovered hidden users and sellers who would not have been accessible for interviewing otherwise.

Nominees may appear on more than one respondent’s list of users or sellers. Over three-quarters of these cases are matched conclusively. Furthermore, there is a high level of agreement, at least 90%, among different respondents about the same specific nominee’s drug use and distribution information. *Continued next page.*

Central Harlem,
New York City.
Location for
the Estimating Current
Hard Drug Users
and Operatives Study.



Implications

The project is providing important demographic information and drug use data about users and sellers who are not directly accessible to interviewers. “The methods employed in this study are a promising advance in how survey research is conducted among these populations,” said Rees Davis, Ph.D., Project Director of the *Estimating* study.

1. Davis, W.R., & Johnson, B.D. (1998, November). Using nomination procedures to increase the “representativeness” of samples from illegal populations. Presented at the American Society of Criminology Annual Meeting, Washington, D.C.

2. As in most NDRI studies, and of particular importance for this study, multiple methods to protect the confidentiality of information are implemented: informed consent procedures are followed, information is collected and maintained under strict confidentiality procedures, a Federal Certificate of Confidentiality is obtained and the research methods are reviewed by an Institutional Review Board.

For additional information on this study you may contact Rees Davis, Ph.D.-
E-mail: rees.davis@ndri.org, Phone: 212-845-4462,
Fax: 212-845-4698.

Pilot Projects Initiated

CDUHR announced its first pilot project awards in November, 1998. Tracy L. Durrah, M.P.H., was funded for *The Role of Sexual Abuse in Drug Involvement and HIV/AIDS Risk Behavior*. Ms. Durrah will conduct a secondary analysis of data collected on women arrested in Manhattan in 1996-1997. Debra L. Hagen, Ph.D., received her award for *A Network Intervention among HCV Positive Heroin Users at Risk for HIV*. Dr. Hagen will conduct and evaluate an intervention on the effectiveness of teaching non-injecting heroin users to train other non-injectors in reducing risk behaviors for HIV and hepatitis. Stephanie Tortu, Ph.D. received funding for the *Pilot Study for Women Drug Users, AIDS and Social Context* under expedited review. She is examining the feasibility of recruiting heterosexual couples for a study of high risk women and their main sex partners.

“One of the priorities of the Center is to foster new investigations on emerging trends and issues in the HIV epidemic. We are pleased that two junior investigators obtained funding and that we can support the continuation of a current Principal Investigator’s work” said Beatrice J. Krauss, Ph.D., Director of the Project Development Core of CDUHR.

1998 Research Supplement Awards

NIH (National Institutes of Health) supplement awards were given to four CDUHR projects. Alan Neaigus, Ph.D., received a competing supplement for *HIV Risk and Transitions from Non-injecting Heroin Use*. Dr. Neaigus will examine new injectors, their network influences, and the risk for HIV, hepatitis B, and hepatitis C. Sherry Deren, Ph.D., will conduct qualitative research on high-risk drug users in the Dominican Republic (received as a supplement to the *Puerto Rican Drug Users in New York and Puerto Rico study*). Beatrice Krauss, Ph.D., was awarded a supplement to the *Parent/Pre-adolescent Training for HIV Prevention* project to look at sexual initiation of youth at risk for HIV and sexually transmitted diseases. Robert Hubbard, Ph.D., received a funding supplement to CDUHR for a pilot study comparing international drug treatment approaches.

1998 PUBLICATIONS

January – November

- Abdul-Quader, A. S., Des Jarlais, D. C., Chatterjee, A., Hirky, A. E., & Friedman, S. R. (1998). HIV prevention among injecting drug users in developing countries. In L. Gibney, R. J. Di Clemente, & S. Vermund (Eds.), *Preventing HIV infection in developing countries*. New York: Plenum.
- Clatts, M. C., Davis, W. R., Sotheran, J. L., & Atillasoy, A. (1998). Correlates and distribution of HIV risk behaviors among homeless youths in New York City: Implications for prevention and policy. *Child Welfare, 77*(2), 195-207.
- Deren, S., Beardsley, M., Coyle, S., & Singer, M. (1998). HIV serostatus and risk behavior in a multi-site sample of drug users. *Journal of Psychoactive Drugs, 30*(3), 239-245.
- Deren, S., Beardsley, M., Tortu, S., & Goldstein, M. F. (1998). HIV serostatus and changes in risk behaviors among drug injectors and crack users. *AIDS and Behavior, 2*(2), 171-176.
- Des Jarlais, D. C. (1998). "Single-use" needles and syringes for the prevention of HIV infection among injecting drug users. *Journal of Acquired Immune Deficiency Syndromes, 18* (780, Supplement), S52-S56.
- Des Jarlais, D. C. (1998). Understanding the long-term course of HIV epidemics. *AIDS, 12*(6), 669-670.
- Des Jarlais, D. C. (1998). Validity of self-reported data, scientific methods and drug policy. *Drug and Alcohol Dependence, 51*, 265-266.
- Des Jarlais, D. C., Choopanya, K., Millson, P., Friedmann, P., & Friedman, S. R. (1998). The structure of stable seroprevalence HIV-1 epidemics among injecting drug users. In G. Stimson, D. C. Des Jarlais, & A. Ball (Eds.), *Drug injecting and HIV infection: Global dimensions and local responses*. London: World Health Organization, UCL Press.
- Des Jarlais, D. C., & Friedman, S. R. (1998). Fifteen years of preventing HIV infection among injection drug users: What we have learned, what we have not learned, what we have done, what we have not done. *Public Health Reports, 113* (Supplement 2), 182-189.
- Des Jarlais, D. C., & Friedman, S. R. (1998). HIV and injecting drug users. In M. J. Rosen, & J. M. Beck (Eds.), *HIV and the lung*. New York: Marcel Dekker.
- Des Jarlais, D. C., Hagan, H., Friedman, S. R., Friedmann, P., Goldberg, D., Frischer, M., Green, S., Tunving, K., Ljungberg, B., Wodak, A., Ross, M., Purchase, D., Millson, P., & Myers, T. (1998). Preventing epidemics of HIV-1 among injecting drug users. In G. Stimson, D. C. Des Jarlais, & A. Ball (Eds.), *Drug injecting and HIV infection: Global dimensions and local responses*. London: World Health Organization, UCL Press.
- Des Jarlais, D. C., Vanichseni, S., Marmor, M., & Kitayaporn, D. (1998). HIV vaccine trials [letter]. *Science, 279*, 1434.
- Dunlap, E., & Johnson, B. D. (1998). Gaining access to hidden populations: Strategies for gaining cooperation of sellers/dealers in ethnographic research. In M. De La Rosa, B. Segal, & R. Lopez (Eds.), *Conducting drug abuse research with minority populations: Advances and issues*. Wilmington, PA: Hayworth Press.
- Friedman, S. R. (1998). HIV-related politics in long-term perspective. *AIDS Care, 10* (Supplement 2), S92-S103.
- Friedman, S. R. (1998). The political economy of drug-user scapegoating - and the philosophy and politics of resistance. *Drugs: Education, Prevention and Policy, 5*(1), 15-32.
- Friedman, S. R., Friedmann, P., Telles, P., Bastos, F., Bueno, R., Mesquita, F., & Des Jarlais, D. C. (1998). New injectors and HIV-1 risk. In G. Stimson, D. C. Des Jarlais, & A. Ball (Eds.), *Drug injecting and HIV infection: Global dimensions and local responses*. London: World Health Organization, UCL Press.
- Friedman, S. R., Furst, T., Jose, B., Curtis, R., Neaigus, A., Des Jarlais, D. C., Goldstein, M. F., & Ildefonso, G. (1998). Drug scene roles and HIV risk. *Addiction, 93*(9), 1403-1416.
- Friedman, S. R., & Jose, B. (1998). Hepatitis C transmission and the underreporting of stigmatized behaviors [Letter to the editor]. *Sexually Transmitted Diseases, 25*(4), 220.
- Friedman, S. R., Jose, B., Neaigus, A., Goldstein, M. F., Mota, P., Curtis, R., Ildefonso, G., & Des Jarlais, D. C. (1998). Multiple Racial/Ethnic subordination and HIV among drug injectors. In M. Singer (Ed.), *The political economy of AIDS*. Amityville, NY: Baywood Press.
- Friedman, S. R., Neaigus, A., & Jose, B. (1998). AIDS research and social theory: Selected enigmas and contributions from a long-duration program of applied research. *Research in Social Policy, 6*, 137-158.

- Henman, A. R., Paone, D., Des Jarlais, D. C., Kochems, L. M., & Friedman, S. R. (1998). From ideology to logistics: The organizational aspects of syringe exchange in a period of institutional consolidation. *Substance Use and Misuse*, 33(5), 1213-1230.
- Henman, A. R., Paone, D., Des Jarlais, D. C., Kochems, L. M., & Friedman, S. R. (1998). Injection drug users as social actors: A stigmatized community's participation in the syringe exchange programs of New York City. *AIDS Care*, 10(4), 397-408.
- Johnson, B. D., Dunlap, E., & Maher, L. (1998). Nurturing for careers in drug abuse and crime: Conduct norms for children and juveniles in crack-abusing households. *Substance Use and Misuse*, 33(7), 1515-1550.
- Johnson, B. D., Thomas, G., & Golub, A. (1998). Trends in heroin use among Manhattan arrestees from the heroin and crack eras. In J. A. Inciardi, & L. D. Harrison (Eds.), *Heroin in the age of crack cocaine* (pp. 109-130). Thousand Oaks, CA: Sage
- Liberty, H. J., Johnson, B. D., Jainchill, N., Ryder, J., Messina, M., Reynolds, S., & Hossain, M. (1998). Dynamic recovery: Comparative study of therapeutic communities in homeless shelters for men. *Journal of Substance Abuse Treatment*, 15(2), 1-23.
- Lipton, D. S., & Johnson, B. D. (1998). Smack, crack, and score: Two decades of NIDA-funded drugs and crime research at NDRI 1974-1994. *Substance Use and Misuse*, 33(9), 1779-1815.
- Luciano, P. A., Gallo, T. M., Clatts, M. C., Sotheran, J. L., & Atillasoy, A. (1998). Staying connected with the rest of "us": The moral universe of IV drug users. *High Plains Applied Anthropologist*, 18(1), 26-30.
- Mezzelani, P., Quaglio, G. L., Venturini, L., Lugoboni, F., Friedman, S. R., & Des Jarlais, D. C. (1998). A multicentre study on the causes of death among Italian injecting drug users. AIDS has overtaken overdose as the principal cause of death. *AIDS Care*, 10(1), 61-67.
- Neaigus, A. (1998). The network approach and interventions to prevent HIV among injection drug users. *Public Health Reports*, 113 (Supplement 1), 140-150.
- Neaigus, A., Atillasoy, A., Friedman, S. R., Andrade, X., Miller, M., Ildefonso, G., & Des Jarlais, D. C. (1998). Trends in the non-injected use of heroin and factors associated with the transition to injecting. In J. A. Inciardi, & L. D. Harrison (Eds.), *Heroin in the age of crack cocaine* (pp. 131-159). Thousand Oaks, CA: Sage Publications.
- Paone, D., Des Jarlais, D.C., Singh, M.P., Grove, D., Shi, Q., Krim, M., Needle, R.H., & Hartsock, P. (1998). Update: Syringe exchange programs – United States, 1997. *Morbidity and Mortality Weekly Report (MMWR)*, 47(31), 652-655.
- Paone, D., Perlman, D. C., Perkins, M. P., Kochems, L. M., Salomon, N., & Des Jarlais, D. C. (1998). Organizational issues in conducting tuberculosis screening at a syringe exchange program. *Journal of Substance Abuse Treatment*, 15(3), 229-234.
- Rockwell, R., Friedman, S. R., Sotheran, J. L., & Des Jarlais, D. C. (1998). Medical access for injecting drug users. In M. Singer (Ed.), *The political economy of AIDS*. Amityville, NY: Baywood Press.
- Rockwell, R., Friedman, S. R., Sotheran, J. L., Wenston, J., & Des Jarlais, D. C. (1998). Homelessness, race, HIV testing and drug treatment among injecting drug users in New York City. In M. Singer (Ed.), *The political economy of AIDS*. Amityville, NY: Baywood Press.
- Stevens, S., Tortu, S., & Coyle, S. (Eds.). (1998). *Women, drug use, & HIV infection*. Binghamton, NY: Haworth Medical Press.
- Stimson, G., Des Jarlais, D. C., & Ball, A. (Eds.). (1998). *Drug injecting and HIV infection: Global dimensions and local responses*. London: World Health Organization, UCL Press.
- Tortu, S., Goldstein, M., Deren, S., Beardsley, M., Hamid, R., & Ziek, K. (1998). Urban crack users: Gender differences in drug use, HIV risk and health status. *Women and Health*, 27(1/2), 177-190.
- Tortu, S., McCoy, H. V., Beardsley, M., Deren, S., & McCoy, C. B. (1998). Predictors of HIV infection among women drug users in New York and Miami. *Women and Health*, 27(1/2), 191-204.
- Wood, M. M., Tortu, S., Rhodes, F., & Deren, S. (1998). Differences in condom behaviors and beliefs among female drug users recruited from two cities. *Women and Health*, 27(1/2), 137-160.

CDUHR Staff Announcements

Carmen Ortiz-Priester was appointed Administrative Coordinator in April 1998. Ms. Ortiz-Priester has been at NDRI for ten years and assisted with HIV/AIDS projects for the last nine years. Ms. Ortiz-Priester continues her administrative functions on two CDUHR projects.

Michael Palij, Ph.D., became the Assistant Director of the Methods Development and Data Analysis Core in November 1998. He is an experimental psychologist who has been at NDRI for the past five years conducting research in substance abuse treatment. Prior to this, he was involved in psychiatric research, on projects ranging from the biological nature of anxiety to studying the learning processes of autistic children. Dr. Palij is an adjunct assistant professor at New York University and teaches courses in cognitive psychology, statistics and research methods.

Theresa Perlis, Ph.D., became the Data Analyst for the Strategic National and International Comparisons Core in November 1998. Dr. Perlis has been at NDRI for six years and involved in HIV/AIDS research for the past four years. She retains her current positions as Project Director for two studies: Risk Factors for AIDS among IDUs and HIV Risk among Street Recruited Drug Injectors.

Dorline Yee, Research Associate, joined the Administration and Coordination Core in September 1998. Ms. Yee has been at NDRI for the last three years working on a meta-analysis on the effectiveness of treatment in correctional settings and previously taught statistical methods at Hunter College. She is currently completing work for her Master's Degree in Psychology from Hunter College.

Beatrice Krauss Receives Award

Beatrice J. Krauss, Ph.D., received the Kurt Lewin Award for 1998 from the Division of Social Issues of the New York State Psychological Association for her contributions in the area of HIV/AIDS. The award was announced at the annual convention of the NYS Psychological Association in October 1998, and was accompanied by an invited address at Hunter College, in New York City in December 1998, entitled *Destigmatizing HIV*. "Although the award was given to me, no work goes forward without the encouragement and support of colleagues, dedicated staff, institutional support, an involved and energetic funding agency, and a community that voices and participates in meeting its own urgent needs" said Dr. Krauss in accepting the award. Kurt Lewin was a social psychologist who founded the area of social action research in the United States. The award is given annually to a researcher who uses the social sciences to improve people's lives.

CDUHR/Training Institute

The Training Institute provides training for the New York State AIDS Institute and conducts courses by special request. In addition, during certain months, courses are offered to the public at no cost or for a small fee. Following are courses available in February 1999.

<i>Date</i>	<i>Course</i>
2/16-17	Working W/Mandated Criminal Justice Clients (12 hrs)
2/24	Protease Inhibitor Update (3 hrs)*
2/24	Drug Treatment For Women Offenders (3 hrs)
2/25	Adherence Strategies (3 hrs)*
2/25	Returning to Work & Maintaining Medicaid/Medicare (3 hrs)*
2/26	Confidentiality/Partner Notification (2 hrs)*
2/26	Internet for HIV Service Providers (3 hrs)*

*Course offered at no cost.

These courses are eligible for contact hours for CASAC credentialing. For a complete listing of 1999 courses, the curriculum of Special Request courses and information on the courses listed above, call the Training Institute at (212) 845-4570, or access our web site at <http://www.ndri.org>.

CDUHR Supported Projects

Alternative Program for Methadone Maintenance Dropouts (NIDA)
Principal Investigator:
Sherry Deren, Ph.D.

Drug Use and HIV Risk Among Youth (NIDA)
Principal Investigator:
Samuel R. Friedman, Ph.D.

Estimating Current Hard Drug Users and Operatives (NIDA)
Principal Investigator:
Bruce D. Johnson, Ph.D.

Families in Transition (NYS AIDS Institute)
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