

RECENTLY PUBLISHED RESEARCH

● **Baumgartner JN**, Burns JK

Measuring social inclusion — a key outcome in global mental health. Int J Epidemiol 2014 Apr; 43 (2): 354-64. [Journal Impact Factor: 9.197]

Social inclusion is increasingly highlighted as a key outcome of global mental health programs and policies; however, its measurement is underdeveloped. This systematic review of social inclusion measures for populations with mental disorders revealed few scale options and a strong need for additional scale development, adaptation and testing in low- and middle-income countries.

● Bekker LG, Johnson L, Cowan F, Overs C, Besada D, Hillier S, **Cates W Jr**

Combination HIV prevention for female sex workers: what is the evidence? Lancet 2014 Jul; epub ahead of print. [Journal Impact Factor: 39.207]

Female sex workers are among the highest risk key populations for targeting HIV prevention tools and messages. This article describes the latest scientific data on the various methods women can use, either singly or in combination, to protect themselves from HIV.

● **Burke HM, Mueller MP, Perry B, Packer C, Bufumbo L**, Mbengue D, Mall I, Daff BM, Mbonye AK
Observational study of the acceptability of Sayana® Press among intramuscular DMPA users in Uganda and Senegal. Contraception 2014 May; 89 (5): 361-67. [Journal Impact Factor: 2.932]

Sayana Press was found acceptable and safe in diverse settings. This provides evidence that Sayana Press could reduce unmet family planning needs if introduced into family planning programs. Clients would select it, and providers — including trained community health workers, particularly in areas with provider shortages — could administer it.

● **Corneli AL, McKenna K, Headley J**, Ahmed K, Odhiambo J, Skhosana J, **Wang M**, Agot K, FEM-PrEP Study Group
A descriptive analysis of perceptions of HIV risk and worry about acquiring HIV among FEM-PrEP participants who seroconverted in Bondo, Kenya, and Pretoria, South Africa. J Int AIDS Soc 2014 Sep; 17 (Suppl 2): 19152. [Journal Impact Factor: 4.207]

The findings suggest that some women who are at substantial risk of acquiring HIV may underestimate their actual risk. Understanding and responding to women's rationalizations about their HIV risks could enhance their use of risk reduction methods and should be explored during HIV risk reduction counseling.

● **Evens E, Lanham M, Hart C**, Loolpapit M, Oguma I, Obiero W
Identifying and addressing barriers to uptake of voluntary medical male circumcision in Nyanza, Kenya, among men 18-35: a qualitative study. PLoS One 2014 Jun; 9 (6): e98221. [Journal Impact Factor: 3.534]

Financial concerns and fear of pain are the top barriers to male circumcision among men 18–35 years. Men need accurate and detailed information on what to expect during and after voluntary medical male circumcision, regarding both pain and time away from work. This information should be incorporated into demand creation activities for men considering circumcision.

● **Feldblum PJ**, Enosse S, Dube K, Arnaldo P, Muluana C, Banze R, Nhanala A, Cunaca J, **Chen PL**, Robb ML, Thompson R
HIV prevalence and incidence in a cohort of women at higher risk for HIV acquisition in Chókwè, southern Mozambique. PLoS One 2014 May; 9 (5): e97547. [Journal Impact Factor: 3.534]

This is the first measurement of HIV incidence in Chókwè, the province with the highest HIV prevalence in the country, and demonstrates some of the risk factors for infection as well as the need for more vigorous prevention programs.

● **Feldblum PJ**, Odoyo-June E, Obiero W, Bailey RC, **Combes S, Hart C, Lai JJ, Fischer S**, Cherutich P
Safety, effectiveness and acceptability of the PrePex device for adult male circumcision in Kenya. PLoS One 2014 May; 9 (5): e95357. [Journal Impact Factor: 3.534]

This is the first published data on performance of the PrePex device outside of Rwanda. These data will be vital for the Kenya Ministry of Health to decide on the potential role of PrePex in the national Voluntary Medical Male Circumcision program.

● **Haley DF, Lucas J**, Golin CE, Wang J, Hughes JP, Emel L, El-Sadr W, Frew PM, Justman J, Adimora AA, Watson CC, Mannheimer S, Rompalo A, Soto-Torres L, Tims-Cook Z, Carter Y, Hodder SL, HPTN O64 Study Team
Retention strategies and factors associated with missed visits among low income women at increased risk of HIV acquisition in the U.S. (HPTN O64). AIDS Patient Care STDS 2014 Apr; 28 (4): 206-17. [Journal Impact Factor: 3.576]

Multifaceted approaches contribute to achieving high retention rates for women participating in HIV prevention research. While such retention efforts require substantial human and fiscal resources, they are essential to reaching accurate study results. These approaches may also be appropriate to use in the retention of similar populations in non-HIV-related clinical trials, as well as in clinical care.

● **Lanham M, Wilcher R**, Montgomery ET, Pool R, **Schuler S, Lenzi R**, Friedland B
Engaging male partners in women's microbicide use: evidence from clinical trials and implications for future research and microbicide introduction. J Int AIDS Soc 2014 Sep; 17 (Suppl 2): 19159. [Journal Impact Factor: 4.207]

Efforts to engage men in future microbicide introduction must take care not to diminish women's competency to decide whether to use the product and inform their partners. To support women's ability to access and use microbicides, we recommend counseling women on whether and how to involve their partners, including strategies for gaining partner approval; providing couple counseling on microbicides so men have the opportunity to talk with providers; and targeting men with community education and mass media to increase their awareness and acceptance of microbicides.

● **Lopez LM, Stockton LL, Chen M, Steiner MJ**, Gallo MF
Behavioral interventions for improving dual-method contraceptive use (review). Cochrane Database Syst Rev 2014 Mar; 3 CD010915, 29 p. [Journal Impact Factor: 5.939]

This systematic review examines comparative studies of behavioral interventions for improving dual-method contraceptive use. It identifies behavioral interventions associated with preventing pregnancy and transmission of sexually transmitted infections including HIV.

● **Mack N, Evens EM, Tolley EE**, Brelsford K, **Mackenzie C**, Milford C, Smit JA, Kimani J
The importance of choice in the rollout of ARV-based prevention to user groups in Kenya and South Africa: a qualitative study. J Int AIDS Soc 2014 Sep; 17 (Suppl 2): 19157. [Journal Impact Factor: 4.207]

The circumstances and preferences of sub-Saharan African women are likely to vary within and across groups and to change over time. This study highlights the importance of policy makers, programmers and researchers ensuring the availability of choice in HIV prevention methods.

● **Mastro TD, Sista N**, Abdool-Karim Q
ARV-based HIV prevention for women — where we are in 2014. J Int AIDS Soc 2014 Sep; 17 (Suppl 2): 19154. [Journal Impact Factor: 4.207]

Antiretroviral (ARV) drugs have been shown to be highly effective for HIV prevention when used as pre-exposure prophylaxis to prevent HIV acquisition and as ARV treatment for HIV-infected patients to prevent onward transmission (treatment as prevention (TasP)). We now need to learn how best to use these powerful tools to achieve maximum public health impact.

● **Merrigan MB**, Tafuma TA, **Okui LA**, Lebelonyane R, Bolebantswe JM, Makhaola K, Mine M, **Adhikary R, Chabikuli NO**
HIV prevalence and risk behaviors among female sex workers in Botswana: results from the 2012 HIV/STI bio-behavioral study. AIDS Behav 2014 Jul; epub ahead of print. [Journal Impact Factor: 3.312]

Sex work is illegal in Botswana, and HIV prevention programs for female sex workers, as well as other key populations, are in their infancy in this country. This landmark study provided the first-ever HIV prevalence data, as well as a demographic and behavioral profile, for this group. Following the study, the Ministry of Health contracted a local organization to provide clinical services to female sex workers, and key populations are on the HIV prevention agenda in Botswana. The U.S. Agency for International Development is planning to fund a follow-up in 2015.

● **Morrison C**, Fichorova RN, Mauck C, **Chen PL, Kwok C**, Chipato T, Salata R, Doncel GF
Cervical inflammation and immunity associated with hormonal contraception, pregnancy and HIV-1 seroconversion. J Acquir Immune Defic Syndr 2014 Jun; 66 (2): 109-17. [Journal Impact Factor: 4.394]

RANTES and SLPI warrant further study as predictors of HIV seroconversion. Combined oral contraception users and pregnant women have higher inflammatory background levels and potentially compromised cervical barrier function. The results suggest that contraceptive choices affect the immunoinflammatory environment in the female genital tract.

● **Nanda K, Lendvay A, Kwok C, Tolley E, Dubé K, Brache V**
Continuous compared with cyclic use of oral contraceptive pills in the Dominican Republic: a randomized controlled trial. Obstet Gynecol 2014 May; 123 (5): 1012-22. [Journal Impact Factor: 4.368]

Continuous and cyclic oral contraceptive pill (OCP) regimens were associated with similar 12-month continuation and pregnancy rates. Few factors predicted OCP discontinuation or pregnancy.

● **Perry B**, Oluoch L, Agot K, **Taylor J**, Onyango J, Ouma L, Otieno C, **Wong C, Corneli A**
Widow cleansing and inheritance among the Luo in Kenya: the need for additional women-centered HIV prevention options. J Int AIDS Soc 2014 Jun; 17 (1): 19010. [Journal Impact Factor: 4.207]

This paper describes the sexual risk-taking behaviors of Luo widows and inheritors in Nyanza Province, Kenya, and considers the potential for Luo widows to use pre-exposure prophylaxis during the time leading up to and immediately after engaging in these behaviors.

● **Petrunev T, Wilson LC, Stanback J, Cates W Jr**
Family planning and the post-2015 development agenda (editorial). Bull World Health Organ 2014 Aug; 92 (8): 548-548A. [Journal Impact Factor: 5.112]

This data-driven editorial extends previous arguments made for the connections between family planning and development goals from the Millennium Development Goal era to the post-2015 agenda. The evidence presented reinforces the rationale for ensuring that sexual and reproductive health are a core component of the next global development framework.

● Thirumurthy H, Masters SH, Rao S, Bronson MA, **Lanham M**, Omanga E, **Evens E**, Agot K
Effect of providing conditional economic compensation on uptake of voluntary medical male circumcision in Kenya: a randomized clinical trial. JAMA 2014 Aug; 312 (7): 703-11. [Journal Impact Factor: 30.387]

Small economic incentives can modestly increase circumcision prevalence by addressing reported economic barriers to voluntary medical male circumcision (VMMC) and behavioral factors, such as present-biased decision making. While incentives alone do not address all reasons why men do not become circumcised, study results suggest that programmatic and research interventions that seek to increase demand for VMMC should include incentives as one of their demand-generating strategies.

● **Tolley EE**, Kaaya S, Kaale A, Minja A, Bangapi D, Kalunguru H, **Headley J, Baumgartner JN**
Comparing patterns of sexual risk among adolescent and young women in a mixed-method study in Tanzania: implications for adolescent participation in HIV prevention trials. J Int AIDS Soc 2014 Sep; 17 (Suppl 2): 19149. [Journal Impact Factor: 4.207]

In Tanzania, this two-phase mixed method study compared the acceptability and feasibility of adolescents (ages 15–17) and young adult women (ages 18–21) to participate in future HIV prevention trials. Similar to young adult women, adolescents under 18 are at risk of multiple negative sexual and reproductive health outcomes but are less likely to use preventive services. Their access to new technologies, such as vaginal microbicides or pre-exposure prophylaxis (PrEP), may similarly be compromised unless greater effort is made to include them in clinical trial research.

● **Vance G, Janowitz B, Chen M, Boyer B, Kasonde P**, Asare G, Kafulubiti B, **Stanback J**
Integrating family planning messages into immunization services: a cluster-randomized trial in Ghana and Zambia. Health Policy Plan 2014 May; 29 (3): 359-66. [Journal Impact Factor: 3.000]

The research findings indicate that the approach for incorporating family planning demand-generating activities into routine child immunization programs was not effective in increasing contraceptive uptake. However, results from qualitative findings indicate that this approach has promise but may need to be embedded more systematically into management structures to be effective and sustainable.