



*Moving Away from a Singular Vision:  
Aligning community needs and agency responsiveness  
via health education & risk reduction philosophies  
Health Education HIV Prevention Philosophies:*

What is your approach to HIV prevention? Sometimes bias can affect it. Most people think of bias in terms of prejudice or discrimination that might keep someone from getting a job, for example. But bias can operate on many different levels. When doing HIV prevention work, it's very important to check for our own biases before we begin. If we don't do this, we run the risk of making choices that may not be in the best interest of the people we hope to serve.

Historically there have been three popular HIV prevention philosophies that have typically guided the work and decisions of many community-based organizations. Abstinence Education, Risk Reduction and Harm Reduction strategies can be used alone or in combination. To support operating from a place of strategy versus crisis, we recommend doing a local study of HIV rates, risk behaviors and other factors to determine what approaches communities are in need of (the science) rather than simply employing a strategy due to preference or funding. At the heart of High Impact Prevention is willingness to do what is both cost effective and works. Remember, communities should inform our approach--never the other way around!

Protective Strategy Systems	Proactive Mode	Reactive Mode	Crisis Mode
			
<ul style="list-style-type: none"> <li>Using Health Department jurisdictional epidemiological assessment to determine approach</li> <li>Tailoring approaches to specific projects and not the entire agency.</li> <li>Ongoing professional development around typical approaches (abstinence, risk reduction and harm reduction) in a variety of context i.e. sex, drugs...</li> <li>Ensuring quality control of approach/philosophy implementation by having standards for approach implementation and key phrases and messages all staff are expected to be familiar with when speaking on behalf of the agency.</li> </ul>	<ul style="list-style-type: none"> <li>Approach selected based on client feedback assessments</li> <li>Using another CBOs data to determine approach.</li> <li>Ensuring staff no the difference between approaches and can distinguish between the three typical approaches (abstinence, risk reduction and harm reduction)</li> </ul>	<ul style="list-style-type: none"> <li>Use approach inherited by previous employees</li> <li>Guessing anecdotally which approach should be use because assessments seem too cumbersome.</li> </ul>	<ul style="list-style-type: none"> <li>Use an approach because it's the only one your familiar with.</li> <li>Use an approach because it is aligned with your personal values.</li> </ul>

## Steps to Dual Role Responsiveness Diverse and Inclusive Strategy:

Consider protective steps that help to better understand a potential issue or stop it before it even starts:

### 1. Request Training on Typical Health Education & Risk Reduction Philosophies -

**Abstinence-Based Education:** has as its exclusive purpose teaching the social, psychological, and health gains to be realized by abstaining from sexual activity

**Risk Reduction:** Specific to reduce the risk of getting or transmitting HIV

**Harm Reduction:** strategies aimed at reducing the adverse effects of drug use or consequences of sex behaviors on health

### 2. Formative Assessment & ongoing data collection review - In order to make sure our prevention approaches are aligned with the needs of the community, a formative assessment that consist of:

- ✓ input from key stake holders,
- ✓ focus groups with clients,
- ✓ trends identified by agency staff and
- ✓ most importantly get access to your local epidemiological jurisdictional profile.
- ✓

This information will tell you risk behaviors of your focus populations which can inform which approach might be best suited for your project.

### 3. Support Implementation & Quality Control - Once your approaches have been identified the next step is integrate the approach or combination of approaches into programming and identify capacity building supports that can help institutionalize your approaches, streamline project services in to be aligned with the chosen approach(es) and develop systems that that check and balance quality of approach implementation and actualization.

**Logic Model** When you look at the logic model below, where do you see opportunities to institutionalize your brand of Health Education Risk Reduction philosophies? Schedule a meeting with one of our CBAs to get this conversation started.

