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Assessing the comprehensive integrated HIV prevention behavioral health outcomes of at-risk minority populations

Aim: This study was aimed at assessing the comprehensive integrated HIV prevention evidence-informed interventions, short-term behavioral outcomes among at-risk minority young adults. The behavioral outcomes included substance use perception, alcohol consumption risk awareness, risky sexual behavior, medical care knowledge, tobacco use risk awareness, marijuana use risk awareness, alcohol consumption risk awareness, substance use risk awareness, condom use, and alcohol-related mental health.

Method: Survey data using The National Minority SA/HIV Prevention Initiative Cohort 7 Adult Questionnaire with observed variables measuring each of the behavioral outcomes were collected at program inception (baseline) and end of the first year of program implementation (post) from at-risk young minority adults. The data were subjected to structural equation modeling using exploratory factor analysis (EFA) and confirmatory factor analysis (CFA). CFA produced standardized beta coefficients and measurement fit indices for each latent construct and its corresponding observed variables. EFA produced Cronbach's alpha reliability coefficient for each of the latent constructs and the overall HIV prevention causal model. The overall stability and validity of the HIV prevention causal model was assessed by estimating the chi-square statistic, comparative fit index (CFI), and root mean square error approximation (RMSEA) and Mardia's normalized multivariate kurtosis (CR). Independent sample t-test was performed comparing the baseline behavioral outcomes to the exit behavioral outcomes.

Result & Conclusion: Except for marijuana risk perception and HIV knowledge, all the behavioral outcomes studied had moderate or high positive behavioral outcomes. We conclude that overall, the comprehensive integrated HIV prevention program shows promised of positively changing risk behavior of at risk minority young adults. Hence, comprehensive integrated HIV prevention evidence-informed interventions to reduce risky behaviors and HIV infection among young adult minority populations should be encouraged.

Biography

Maurice Y. Mongkuo is Professor of Public Administration at Fayetteville State University (FSU) and PI/Project Director of FSU MSI CBO HIV Prevention Project. He obtained his PhD. in public policy research and analysis from the University of Pittsburgh. He has authored two books and over 30 peer-reviewed articles, monographs, technical reports, and policy briefings on HIV prevention behavior and socio-economic problems of at-risk minority youths and adults. His research and scholarship portfolio is a diverse nexus of social science, and behavioral and public health research. His research and consultancy focus on at-risk health behavior, healthcare and economic disparities in underserved communities and people, global health, HIV/AIDS prevention behavior, HIV prevention evidence-based interventions, development and validation of measurement and structural models for designing and assessing behavioral health care intervention outcomes. For over 20 years, Prof. Mongkuo has been the Principal Investigator, Project Director and Evaluator of numerous government-funded public policy research and HIV prevention projects involving at-risk minority populations and communities. He presently serves on the Editorial Board and reviewer of 17 peer-review Medical, Public Policy, and Public Health Journals. He has presented over 50 research papers at numerous professional meetings, workshops, and conferences.

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