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HIV/AIDS and Mental Health Among Youth and Families

Introduction

HIV transmission continues to be a major public health problem for high-risk groups such as youth, men who have sex with men, and people of color. Mental health problems exacerbate HIV-risk through impaired decision-making, poor interpersonal communication, and limited adherence to antiretroviral medication. The Healthy Youths Program and the Community Outreach Intervention Projects focuses on multiple characteristics related to HIV-risk and tests evidence-based interventions to reduce risk behavior at the individual, family, and community levels. Selected studies currently target clean needle use among injection drug users, family-based HIV-prevention for South African youth, strengthening communication among African American mothers and daughters, linkage to HIV-care for men and women leaving jail and prison, understanding the impact of dating violence and exposure to trauma in HIV-risk behavior, increased condom use and healthy relationships among juvenile offenders, and improving medication adherence among HIV+ Rwandan youth.

What we have learned to date:

1. Adolescent mental health problems (i.e., conduct disorders, depression, and trauma) are associated with greater sexual risk taking and substance use, particularly for youth whose peers support sexual activity and drug use.
2. 93% of youth on probation in Chicago report exposure to at least one traumatic event, and 74% have heard about the violent death or serious injury of a loved one.
3. Family factors including parental monitoring, warmth, open communication, and attachment are related to less risky sexual behavior among adolescents receiving mental health services.
4. Improving parent-teen communication about sex and condom use increases the likelihood that adolescents will use condoms when they have sex; it does not increase adolescent sexual behavior.

5. Exposure to violence predicts later sexual risk taking among African American young women.
6. HIV-prevention interventions can reduce risky sexual behavior and substance use among juvenile offenders and youth with mental health problems.

Where do we go from here?

Dissemination and implementation are the most important next steps in HIV prevention. Unfortunately, many evidence-based interventions languish on academic “shelves,” because we fail to understand the barriers and facilitators to moving these programs into real-life settings. Identifying cost-effective and efficient strategies to implement and sustain effective programs in relevant settings requires ongoing collaboration among academics, communities, and key stakeholders. Through strong partnerships, we can bring effective programs into the settings where they are most needed, and we can begin to stem the AIDS epidemic.

About Our Researcher

Dr. Donenberg is a Professor in the College of Medicine and the Associate Dean of Research in the School of Public Health. She is a licensed clinical psychologist and directs the Community Outreach Intervention Projects (COIP) and the Healthy Youths Program (HYP). Dr. Donenberg’s national and international research focuses on individual, peer, partner, and family mechanisms associated with risky sexual behavior and substance use among high-risk youth, and adapting and designing specially targeted interventions to prevent HIV transmission and increase adherence to antiretroviral medications. With continuous funding from the National Institutes of Health since 1999, Dr. Donenberg has trained many Doctorate, Masters and Bachelor-level students over the past 15 years. She serves on numerous federal grant review panels and actively mentors junior faculty through national initiatives for traditionally underrepresented minority scholars. Dr. Donenberg received her Bachelor Degree in Psychology and Political Science at the University of Michigan and her Master of Arts and Doctoral Degree in clinical psychology from UCLA. In 2007, she completed a Fulbright Scholarship in South Africa.

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