

8:30 am – 5:00 pm

(1-003) PRE-CONFERENCE WORKSHOP I, *Seacliff A*

SYNTHESIS ACROSS MULTIPLE, LONG-TERM OUTCOMES OF PREVENTION INTERVENTIONS DELIVERED EARLY IN LIFE AMONG LESBIAN, GAY, BISEXUAL AND TRANSGENDERED YOUTH

Organizers: *Richard A. Jenkins, PhD*, National Institute on Drug Abuse, *Eve E. Reider, PhD*, National Institute on Drug Abuse

Moderators: *George W. Howe, PhD*, George Washington University, *Ronald D. Stall, PhD, MPH*, University of Pittsburgh

Presenters: *Judith B. Bradford, PhD*, The Fenway Institute, *C. Hendricks Brown, PhD*, University of Miami, *Tatiana Perrino, PhD*, University of Miami, *Mark Hatzenbuehler, PhD*, Columbia University, *David MacKinnon, PhD*, Arizona State University, *Brian Mustanski, PhD*, Northwestern University, *Elizabeth B. Robertson, PhD*, National Institute on Drug Abuse

According to a recent IOM report there is a paucity of research and information on the health of lesbian, gay, bisexual and transgendered (LGBT) youth. LGBT youth are considered at increased risk for comorbid drug abuse, including smoking, mental health problems, and health-risking sexual behaviors (HRSB) related to HIV/AIDS. There also is increased representation of LGBT youth among the homeless and in the juvenile justice system. Despite rapid social change, LGBT youth continue to be subject to bullying, discrimination, and problems with parental acceptance, which may contribute to these problem areas. These comorbidities may be linked and synergistic. Stall et al. (2003) described that additive psychosocial health problems, otherwise known collectively as a syndemic, exist among urban MSM and that the interconnections of these problems, function to magnify the effects of the HIV/AIDS epidemic in this population. Protective and ameliorative factors for these youth are less well documented or studied which makes it important to understand how multiple etiologies and outcomes are linked and whether existing preventive interventions have an impact.

A body of findings is accumulating from NIDA's drug abuse prevention portfolio showing long-term effects of prevention interventions delivered early in life into adolescence and young adulthood on a broad array of risky (e.g., substance use, delinquency, violence) and protective behaviors (e.g., academic achievement), including behaviors not targeted in the interventions, such as HRSB related to HIV/AIDS (e.g., Griffin, Botvin, & Nichols, 2006; Ellickson, McCaffrey, & Klein, 2009; Lonczak, Abbott, Hawkins, et al., 2002). In addition, these prevention interventions generally have been found to have their greatest effects on participants at highest risk (e.g., Spoth, Redmond, Clair, Chungyeol, Greenberg, & Feinberg, 2011; Brody, Beach, Philibert, Chen, & Murry, 2009; Kellam et al., 2008). Secondary analysis of existing epidemiological cohorts of youth suggest that LGBT youth are affected by many of the same risk and protective factors as other youth (e.g., Marshal et

al., 2008) while other research suggest that additional variables may be of additional importance for LGBT youth (e.g., Hatzenbuehler et al., 2012). Therefore, it is conceivable that prevention interventions delivered early in life may have effects in adolescence and young adulthood on substance use, mental health and HRSB of LGBT persons. However, individual extant NIDA-funded prevention intervention studies with long-term outcomes do not have sufficient numbers of LGBT youth in their data sets to conduct study-specific analyses. Data sets would need to be harmonized across prevention intervention studies with long-term outcomes to determine intervention effects on those identifying as LGBT in adolescence and young adulthood and additional measures focused on LGBT status and HRSB related to HIV/AIDS may need to be added to ongoing studies.

The purpose of this workshop is: 1) to review major findings and research gaps from the IOM report on LGBT health; 2) to review our understanding of the normative development of LGBT youth, 3) to examine outcomes relevant to LGBT youth from prevention intervention studies that are implemented in childhood and followed into adolescence and young adulthood; 4) to discuss the feasibility of synthesizing data sets across prevention intervention studies with outcomes in adolescence and young adulthood to examine drug use and abuse, HRSB related to HIV/AIDS and other important mental, emotional and behavioral (MEB) outcomes for LGBT youth, 5) to determine methodologic steps necessary to accomplish synthesis of data sets and analysis of data with considerations related to small or selected samples, harmonization of measures, and 6) to discuss and problem solve potential barriers including sharing of research data. In addition to traditional outcomes and risk factors of importance to youth, consideration will be given to variables that may be particularly important to LGBT youth such as indicators of social discrimination, internalized homophobia, and the social and legal environment (e.g., Hatzenbuehler et al., 2012), as well as developmental considerations such as exposure to sexual abuse and development of long-term intimate relationships. Beyond the specific issues relevant to LGBT youth, this workshop may be helpful in illustrating issues that need to be considered in evaluating the effects of early intervention on persons drawn from potentially important, but relatively small populations. These may include racial/ethnic groups (e.g., Asian-Americans, Latinos, or African-Americans) or subgroups (e.g., specific ethnicities within a racial or ethnic category or considerations such as immigration status or assimilation/acclimation).

8:30 am – 5:00 pm

(1-004) PRE-CONFERENCE WORKSHOP II, Seacliff B**MISSING DATA ANALYSIS**

Presenter: *Craig Enders, PhD*, Associate Professor, Psychology, Arizona State University

There have been substantial methodological advances in the area of missing data analyses during the last 25 years. Two missing data techniques, maximum likelihood (ML) and multiple imputation (MI) are currently considered “state of the art” in the methodological literature. These techniques have a strong theoretical foundation, and are “robust,” in the sense that they make less strict assumptions about the cause of the missing data. These procedures have a strong theoretical foundation, and are also supported by a large body of empirical work. Methodological studies have demonstrated that ML and MI are less prone to bias, and are more powerful than “traditional” missing data techniques (e.g., listwise deletion of cases, replacing missing values with the mean) that are ubiquitous in published research studies.

The primary goal of this course is to provide participants with the skills necessary to understand and appropriately implement ML or MI in their own research studies. In achieving this goal, it will be important to present technical information in a way that is easily accessible to researchers with limited statistical expertise. The session will provide a mixture of theoretical information, and computer applications. All of the lecture material will be provided in presentation slide format, and extensive computer code will be provided in the handouts, along with computer outputs. The session will emphasize the application of these techniques, so participants should leave the training session with new skills and the background knowledge that allows them to appropriately apply these new methods to their own research. The specific goals of the session are as follows: (a) provide a conceptual overview of missing data theory and assumptions, (b) briefly discuss “traditional” techniques, and demonstrate their shortcomings, (c) discuss ML estimation and how it applies to missing data, (d) discuss MI, (e) demonstrate the use of ML and MI, and discuss the relevant computer output from these procedures.

8:30 am – 5:00 pm

(1-005) PRE-CONFERENCE WORKSHOP III, Seacliff C**MIXED METHODS APPROACHES FOR PREVENTION RESEARCH**

Organizers and Presenters: *Kathy Etz, PhD*, National Institute on Drug Abuse, *Helen I. Meissner, ScM, PhD*, Office of Disease Prevention, Office of the Director, National Institutes of Health, *William Elwood, PhD*, Office of the Director, Office of Behavioral and Social Science Research, National Institutes of Health

Presenters: *Vicki Plano Clark, PhD*, University of Cincinnati, *Laura Schmidt, PhD*, University of California, San Francisco, *Katherine Smith, PhD*, Johns Hopkins School of Public Health, *William Crano, PhD*, Claremont Graduate School

Mixed methods research involves the intentional collection and integration of both qualitative and quantitative data and capitalizes on the strengths of each to enhance the breadth and depth of understanding in research. This approach is increasingly important for addressing complex problems, such as those posed within prevention research, as often neither a qualitative nor quantitative approach alone is sufficient to fully understand the processes involved and/or outcomes of this research area. Mixed methods research is a tool that can help to inform each phase of prevention research, including the assessment and development of measures, the development of intervention content, efficacy and effectiveness testing, and assessing implementation and dissemination strategies.

The goal of this workshop is to illustrate the utility of mixed methods approaches to improve prevention research, providing information in a manner that showcases how participants can use this approach in their work. Specifically, the workshop will:

- Provide an overview of mixed methods research, highlighting some of the specific mixed methods approaches that are commonly used
- Provide a rationale for using mixed methods for prevention research and identify the types of studies for which these methods are most appropriate
- Provide examples of mixed methods designs and approaches in prevention studies
- Demonstrate effective integration of mixed methods in grant writing and analytic plans
- Identify elements of a good mixed methods grant proposal by drawing from and expanding on the report on Best Practices for Mixed Methods Research in the Health Sciences: http://obssr.od.nih.gov/scientific_areas/methodology/mixed_methods_research/index.aspx

The four speakers have used mixed methods research in varying

ways, using mixed methods approaches to address major public health issues. The workshop will end with a panel comprised of the presenters and NIH staff focused on writing competitive mixed methods grant applications.

1:00 pm – 5:00 pm

(1-008) PRE-CONFERENCE WORKSHOP IV, *Seacliff D*

COMMUNITY/RESEARCH PARTNERSHIPS: APPLICATIONS FOR PREVENTION RESEARCH

Organizers and Presenters: *Caryn R. R. Rodgers, PhD*, Assistant Professor, Preventive Intervention Research Center, Department of Pediatrics, Albert Einstein College of Medicine, *Marni Lolacano Merves, LMSW*, Director of Community-Based Participatory Research, Preventive Intervention Research Center, Albert Einstein College of Medicine, *Rosy Chhabra, PsyD*, Assistant Professor, Preventive Intervention Research Center, Department of Pediatrics, Albert Einstein of College of Medicine

There is increasing recognition that Community/Researcher Partnerships can advance prevention agendas and shape a comprehensive national strategy for well-being. Historically research was done “on” communities, however working in partnership with communities increases opportunities for efficacy, translation and sustainability. Although researchers may be interested in working in partnership with communities, it is an intensive process that requires a long-term commitment to community partners. This workshop has four goals.

1. We will provide an overview of the rationale for Community-Based Participatory Research (CBPR) in intervention development, and describe the benefits and challenges of a CBPR approach.
2. We will describe CBPR in general and then apply CBPR principles and models to working with youth, particularly how to engage and partner with adolescents who are considered “hard-to-reach.”
3. This workshop will present techniques and strategies for building and sustaining a successful community/researcher partnership with youth.
4. The workshop will use an existing CBPR partnership as an example to demonstrate the process of intervention development using CBPR with adolescents. This workshop will be interactive and attendees will have the opportunity to discuss how they may incorporate CBPR into their own current and planned projects.

1:00 pm – 5:00 pm

(1-009) INTERNATIONAL NETWORKING FORUM, *Bayview A*

The International Networking Forum is designed to bring together colleagues who are working in the international arena on prevention science research, programs, and policies. This is an interactive forum and it is not a workshop nor a didactic session; rather it is an effort to foster international collaboration in pursuit of promoting prevention science world-wide. Participation is key to the forum. The forum is sponsored by the International Task Force and each year, projects are addressed that will further the underlying goal of supporting and networking colleagues who work in the international arena.

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| 1:00 - 1:40 pm | Welcome, introductions, and overview of International Task Force activities during past year |
| 1:40 - 2:00 pm | The Prevention Hub & Registry –This new virtual hub is developed to serve as a resource to all scientists and practitioners interested in collaborations around the world. |
| 2:00 - 3:00 pm | Successful International collaborations –Using the Delphi method, key principles are distilled and based upon this information, ITF plans to develop a toolkit to share this information. |
| 3:00 - 3:15 pm | BREAK |
| 3:15 - 3:45 pm | Identifying seed monies and accessing support for initiating global collaborations—ideas will be shared regarding successful strategies for initiating international collaborations |
| 3:45 - 4:15 pm | International infrastructures in place to support collaborations in addition to SPR--representatives from other international organizations, including European Union Society for Prevention Research (EUSPR), United Nations Office of Drugs and Crime (UNODC) will briefly provide overviews, other regional efforts to support prevention science will be discussed. |
| 4:15 - 5:00 pm | Guiding our next steps—New ideas and those from previous network forums will be discussed to prioritize the ITF’s activities for the coming year. |