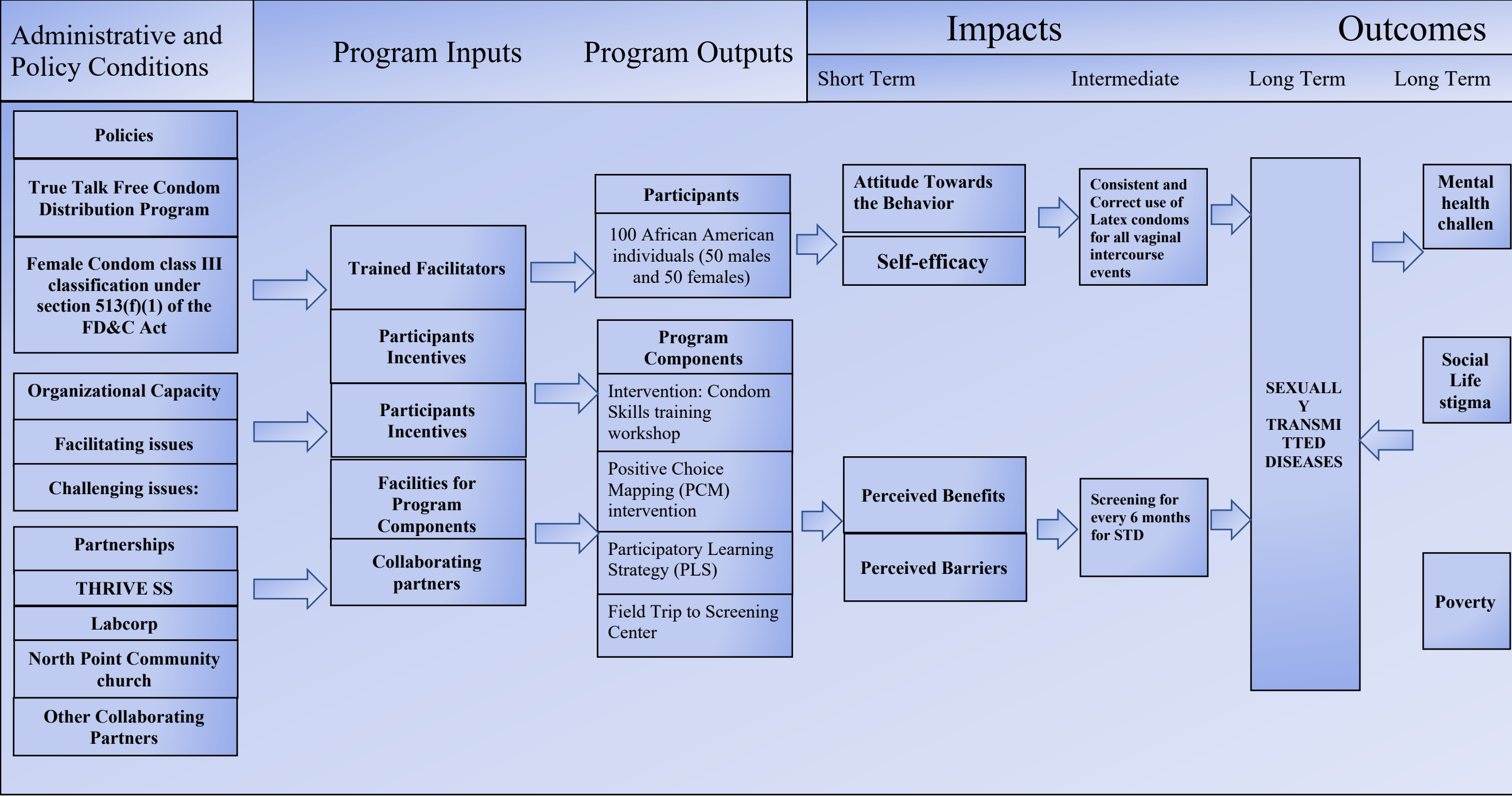




PROJECT “PROTECT”

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Final Program Plan CHNA Findings

Priority Health issues are selected based upon the epidemiological and statistical data provided by OASIS (Georgia Department of Public Health). CHNA of Fulton, GA provides an insight into county health challenges and will assist in selecting a priority health issue in Fulton, GA. From the CHNA, it is notable that Fulton, GA is the most populated county of Georgia with 15 cities, 102 zip codes (Fulton County, 2022), is a home to multi-racial/multi-ethnic population which has serious racial health disparity with income inequality of 5.9, 14% of uninsured (County Rankings and Roadmaps, 2022) people and most congested traffic in the nation (APILGG, 2022). From the Health indicators section, it's obvious that "deaths of despair" are main causes of preventable deaths in the County (WIN, 2022). It's also apparent that adult smoking behavior (13%), physical inactivity behavior (21%), excessive drinking (20%) which are higher than national average are the main causes of many preventable deaths in Fulton (County Rankings and Roadmaps, 2022).

When we observe the trends of the disease its quite evident that the incidence and death rates of disease are high among Blacks when compared to Whites which indicates racial health disparities in Fulton, GA (OASIS, 2022). For instance, more than half of sexually transmitted diseases were recorded by Blacks when compared to Whites (OASIS, 2022). From Health infrastructure section its apparent that the ratio of primary care physicians to population served in Fulton, GA is better when compared to other Georgia counties (County Rankings and Roadmaps, 2022). The three priorities for quality of life are Mental Health Challenges, Social life stigma and Poverty. The three priority Health issues are Sexually transmitted diseases, Cardiovascular diseases, Motor Vehicle crashes.

Priority Health Issue (Sexually Transmitted Diseases)

The overview of this paragraph summarizes STD surveillance data of Georgia state in national level and Fulton County within GA. According to CDC, 2019 STD Surveillance Report, state of Georgia ranks 7 in Chlamydia, 19 in gonorrhea, and 8 in primary and secondary syphilis. Atlanta of Fulton County ranks 22nd among top cities in STD in the United States (Eric & Tim, 2022). In the year 2021, Fulton recorded 16,537 STD cases among 90,733 total STD cases in state of Georgia (OASIS, 2022). Within Fulton County more than half of STD cases were reported by African Americans (11,151 STD cases) and whites reported 1,903 STD cases (OASIS, 2022). In Fulton, GA in 2020 for every 1,00,000 population the incidence rate of STD is 1,441.0 which is much higher than the Georgia State average of 862.2 (OASIS, 2021). This high numbers of cases among African Americans calls for interventions that can target sexual behaviors as improper behaviors are the leading causes in disease development.

Program Identification and Purpose

Program Name: **Project "PROTECT"**

Program Description: Project "Protect" is a protective program intending at protecting the lives of STD positive African American population of Fulton County, ages between 10-24 years to protect them from the detrimental effects of disease and encourage them for condom usage, regular screening. The participants will be engaged in 6 weeklong program which holds on every Wednesday 5 pm -7 pm and Saturdays 10 am -12 pm at **Fulton High School**. During the program STD positive African American individuals aged 10-24 years will be exposed to variety of activities during different sessions which are aimed at improving sexual behaviors, such as constant and consistent use of condoms and frequents screening for STDs.

Program Goal

To enhance healthy sexual behaviors and decrease risky sexual behaviors among African Americans aged 10-24 years of Fulton County

Behaviors and Environmental Conditions

Given the largest number of cases among African Americans in the county, it is critical for African Americans in Fulton, Georgia to practice healthy sexual behaviors. According to Utah Department of Health (2019) risky sexual behaviors such as having multiple sexual partners, frequent changing of partners, sexual intercourse without protection, inconsistent use of birth control pills are significant reasons of developing STD's. According to University of Concordia (2022) safe sexual behaviors include Abstinence from sex, using a barrier such as condoms or dental dams, negotiating sexual activity with the partner, disinfect shared toys, avoid sexual activity where bodily fluids are involved and get vaccinated for STD and get screened for STDs regularly. Among all the above-mentioned sexual behavior I chose to discuss about Correct and consistent use of condom and Frequent screening for STD because if condoms are used correctly there is 95% (female condom) to 98% (male condom) of low chance of contracting STD and frequent screening will help in STD diagnosis and one can initiate treatment at curable stages.

Consistent and Correct use of Latex condoms for all vaginal intercourse events

Condoms are the only means of birth control measures that not only prevents conception but also protects against STD's (CDC, 2021). CDC (2021) recommends that latex condoms must be used correctly and consistently to prevent STD. As disease transmission can happen within first act of intercourse with a STD infected partner, hence, inconsistent condom use can contribute to STD transmission (CDC, 2021). Furthermore, even when condoms are used frequently, the protective effect may be lessened if they are not used correctly (CDC, 2021). According to the prospective studies, which have been published since 2000, indicate that correct and consistent use of condoms are associated with significant protection of individuals against several types of STD's such as gonorrhea, syphilis, herpes simplex virus type 2, chlamydial infection, HIV (Holmes et.al., 2004).

Measurable objective: When measured 45 days post program completion at least 75% of program participants will report using condom regularly during sexual intercourse.

Screening for every 6 months for STDs

Undiagnosed STD can result in quality-of-life issues. Many STDs are asymptomatic, and screening will help in disease (STD) diagnosis (CDC, 2020). Some curable STDs such as gonorrhea and chlamydial infections may result in serious consequences such as nulliparous if left undiagnosed or untreated (CDC, 2020). Moreover, few untreated STDs can result in HIV and mortality (CDC, 2020). Therefore, frequent screening is highly recommended for early diagnosis and prevention of STD related mortality. Screening and timely treatment of asymptomatic patients, and annual rescreening of infected patients are the significant ways to control and prevent STD (Taylor et.al., 2016). African Americans are at highest risk of developing STDs than Whites. Blacks develop gonorrhea 30 times higher than whites (CDC, 2003) and involve multiple sexual partners (Kogen et.al., 2015), therefore it is highly recommended that they undergo screenings once in every 6 months to rule out STD.

Measurable objective: When measured 8 months post program completion at least 75% of program participants will report that they underwent screening once in past six months.

Determinants

There are variety of reasons for individuals to either adopt or resist a behavior. These barriers or facilitators are known as Behavioral determinants (USAID, 2022). These determinants help us to understand why individual has developed a behavior and intervention that targets that behavior will help us in behavioral change of the individual (Gastil, 2009). Therefore, it is highly significant to understand determinants of Condoms use and screening behaviors to develop an intervention which targets those determinates which ultimately helps in behavioral change in individual and results in decrease in STD rates in the Fulton, GA among African Americans. For Condom use behavior I chose Attitude and Self-efficacy towards condom behavior. I chose those determinants because there is a good possibility that if we can help people establish favorable attitudes regarding condom usage and raise their self-efficacy toward behavior, they will adapt to behavioral change for the rest of their lives. Furthermore, I chose Perceived Barriers and Perceived Benefits for Frequent Screening behavior because if we can make people understand the benefits it makes barriers look small and there are high chances for the person to follow screening behaviors for the rest of his life.

Consistent and Correct use of Latex condoms for all vaginal intercourse events

Attitude towards the behavior: Understanding the determinants of condom use will aid in developing effective interventions where individuals will adapt to positive attitudes towards condom usage (Senn et.al., 2012). Condom use is associated with negative attitudes such as negative perception of pleasure, unavailable during sex, coitus interruptus, unreliable, and not natural (Ross, 1992). Attitude Towards condom use is one of the strong determinants of the condom behavior and it varies by type of relationship such as committed or causal relationship (Sen et.al., 2012). Partners in committed relationship have negative attitudes towards condom use behavior as condom use suggests lack of trust and decreases intimacy (Fortenberry et.al., 2002). Indeed, it was found that higher the level of commitment in a relationship, the lower the positive attitude towards condom usage behavior (Harvey et.al., 2006). Furthermore, in research study conducted by Peterson et.al., (2010) among African American men who have sex with mem found that men in a committed relationships have fewer positive attitudes towards condom use behavior.

Measurable objective: At the end of the program, at least 80% of participants will have an increased score on a measure of attitudes toward condom use when assessed during the last session of the program.

Self-efficacy: Self-efficacy is the belief in one's ability to perform a specific behavior, and higher the self-efficacy to a behavior, higher are the odds that the individual will follow that behavior throughout his/her lifetime (Bandura, 2004). High self-efficacy for condom use behavior is directly proportional to consistency of condom use (Baele, 2001). Condom self-efficacy is confidence of individuals to purchase condom from store, condom negotiation with partners, and use them during sexual intercourse (Ajayi et.al., 2019). In a research study conducted by Crosby et.al., (2013), among African American Women, it was found that low partner sexual negotiation, sporadic sexual communication, unassertive communication results in lower self-efficacy to condom use behaviors. Research study conducted by Dawson et.al., (2019), among African American men who have sex with men it was found that increase in condom use self-efficacy is significantly associated with decrease in condom less anal intercourse. Therefore, it is highly significant to develop interventions aimed at increasing self-efficacy for condom use behavior.

Measurable objective: At the end of the program, at least 75% of participants will report an increased self-efficacy score related to their ability to increase condom use during sexual intercourse

Screening for every 6 months for STDs

Perceived Benefits: In a research study conducted by Tilson et.al., (2004), among adolescents and young adults found that participants in juvenile detention center and released adolescents in the community reported benefits from screening and accepted to get screened annually for asymptomatic STD. In an exploratory study conducted by Chacko et.al., (2009) found that, participants noted two important benefits for STD screening, which includes free screening and treatment related concepts which includes highly confidential, diagnostic, and treatment services at one place. Perceived benefits for STD screening among young women include awareness, being healthy, prevention/protection, treatment, positive effect on others such as protect my partner from STD, protect my unborn child (Chacko et.al., 2009). Perceived benefits outweighed perceived barriers in a cross-sectional study conducted by Banikarim et.al., (2003). Therefore, it is highly recommended to develop interventions aimed at educating individuals about the benefits related to STD screening to reduce STD incidence rates in the United States of America.

Measurable objective: At the end of the program, at least 80% of program participants will have an increased score on a measure of their perceived benefits to undergo screening once in every 6 months.

Perceived Barriers: Perceived barriers for screening for STD include lack of STD related knowledge, services, cost of screening, stigma associated with STD, long waiting times, societal and familial discrimination and urethral specimen collecting methods ((Tilson et.al., 2004).). Systemic barriers include extensive waiting time, high cost, and inappropriate clinical hours, Societal barriers include fear and stigma attached to the disease, and interpersonal barriers include judgmental behaviors by social groups (Tilson et.al., 2004). In a pilot study conducted by Cooke et.al., (2017) among African American men having sex with women at South side of Chicago found that majority of participants i.e., 47% of African American men reported privacy as a major barrier for STD/HIV screening. Uncertainty related to privacy is a significant barrier for STD screening and these men avoid screening due to their concerns about confidentiality (Cooke et.al., 2017). Therefore, intervention aimed at removing barriers will significantly improve in STD screenings.

Measurable objective: At the end of the program, at least 80% of program participants will have a reduced score on a measure of their perceived barriers to undergo screening once in every 6 months.

Participants

The participants of this program will be 100 African American individuals (50 males and 50 females) who has just been diagnosed with STD in past 3 months, ages between 10-24 years and who reside in Fulton, GA. Partners in this program include Sexual Health clinics in Fulton, Ga. Each of those clinics has a designated nurse who will make a referral to the program upon an African American's positive STD diagnosis.

Measurable objective to describe the participants: To deliver a program to 100 African Americans (50 males and 50 females) who has received a STD diagnosis within 3 months prior to the start of the program.

Program Strategies

A total of four strategies are used in this program where each strategy targets one determinant.

Intervention: Condom Skills training workshop

Condom skills training workshop will teach patients how to use condoms correctly and consistently, which reduces the risk of STDs, resulting in increase in positive attitudes towards condom use. In a review study conducted by Ross (1992), appeared that a Condom film which featured sexual graphic behavior, condom use, and placement instructions was effective in generating positive attitudes towards condom use in the study group. Condom skills training will be scheduled for two hours. During second hour of 1st Wednesday, as a part of Condom skills training workshop we will present a 60 mins film with graphical representations about types of condoms, materials used in condom making, placement instructions, statistical evidence how condom can reduce STD transmission. During 1st hour of second Wednesday participants are shown live lectures with animated explanations from well-trained Gynecologists and Urologists who are experts in STD prevention and treatments. We chose visual communication because it aids in better retention of information.

Positive Choice Mapping (PCM) intervention:

PCM interventions was proved highly effective to increase self-efficacy towards condom use behavior. Mapping helps people to initiate a behavior, sustain to that behavior which ultimately increases self-efficacy towards the behavior (Czuchry et.al., 2009). In a research study made by Czuchry et.al., (2009) among African American crack cocaine smokers diagnosed positive for HIV, PCM appears to improve self-efficacy towards condom use behavior by decreasing negative outcome expectancies (“Condoms make sex less pleasurable/romantic”) and to gain control while communicating with partners while negotiating condom use during sexual intercourse.

PCM is conducted under three sessions. Each session is scheduled for two hours and is designed to target self-efficacy of condom use through different approaches. In session one participants develop “Map of Me” (Fig 1) which provides an insight into individuals cognitive representation about STD, which will allow us to modify these cognitive representations and beliefs to encourage correct and consistent condom use on regular basis (Czuchry et.al., 2009). Session 2 is directed to improve self-efficacy and outcome expectancies of condom use behavior (Czuchry et.al., 2009). In this session a map is created to identify negative outcome expectancies of using condoms which is later followed by male and female condom demonstration and how condoms can make sex more fun and pleasurable such as taste of different flavors, warming sensation, and some glow in the dark (Czuchry et.al., 2009).

Fig 1: “Map of Me” Fig Retrieved from Czuchry et.al., 2009

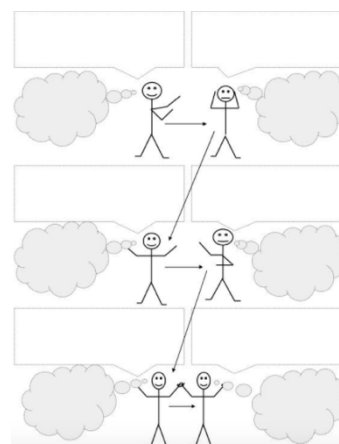
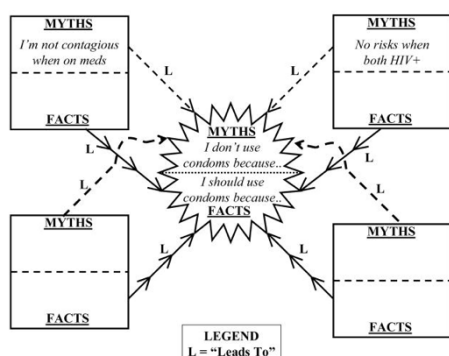


Fig 2: HIV Status guide map Fig Retrieved from Czuchry et.al., 2009

Session 3 is aimed to improve self-efficacy in negotiating condom use in different scenarios with different partners. The session includes an interactive Power point map that shows conversation between partner and a person who hasn't revealed their status yet. Prior to open discussion, individuals complete a disclosing HIV status guide map (Fig 2) about pros and cons of discussing their status with the partners. Individuals are divided into 10 groups (10 members in each group) and each group then collaborates to construct positive dialogues and ideas which will help them to communicate with their partners in disclosing their STD status and negotiate use of condoms during sexual intercourse (Czuchry et.al., 2009)

Participatory Learning Strategy (PLS):

In research studies conducted by Nyblade et.al., (2019), where they assessed 728 peer reviewed abstracts to identify interventions and strategies aimed at Stigma reduction in health facilities, they found Participatory Learning Strategy as one of the leading strategies aimed at reducing "STIGMA" (Perceived Barrier) associated with STD. Participants will attend weekly group training sessions. Participants are divided into 10 groups. Each group plays the roles of STD advocates and will speak on STD risk reduction messages and Perceived barriers such as stigma, embarrassment, discrimination associated with STD screening through interaction, role play, modeling, discussion among participants and providers to build skills to lessen their embarrassment or stigma associated with STD and its screening (Liang et.al., 2010). Each group will also share their "Stories of Hope" for 5-7 mins. According to American Psychological Association member Sadie (2011), our stories have the power to change our future and in the same way the ups and downs in our story will provide others with hope they need to live productive lives.

This strategy schedule is demonstrated clearly in table of events at the end of Program Components Section.

Field Trip to Screening Center:

Participants will visit Grady Memorial Hospital, STD screening center located at Atlanta, GA twice for two hours. Benefits of field trip

Session 01:

1. During visit 01, participants will be shown Power point slides with statistical and graphics representation of
 - a. Data on total number of STD patients aged 10-24 years in the United States, Georgia state, and Fulton County
 - b. Data on total number of STD patients aged 10-24 years getting screened regularly
 - c. Data on total number of cases which underwent treatment and got cured with regular screenings
According to Sasza (2019), former D1 Athlete, one of the pillars of Self-Compassion is knowing that you're not alone struggling or fighting, which is a game changer to participants to fight against STD.
 - d. Information on Confidentiality of the STD reports, how reports are stored, and results are secured (Riya and Praneeta, 2021). According to Thomas et.al., (2006), Confidentiality is important for young people aged 10-25 years to access sexual health services such as frequent screenings, treatments.
 - e. Data on total STD health care providers in Fulton, GA with their ratings and contact details

2. It makes participants realize that they are not alone battling the disease and that there are many others like them, which inspires them to understand the significance of screening (Perceived Benefits) and treatment for STD.
Field trip one is scheduled on 03 Saturday
3. During their 02 visit, participants will be educated theoretically and practically about the process and significance of various procedures involved in STD screenings by health care providers.
4. Participants will have one on one and group interactive sessions with health care providers which will provide in-depth screening and sexual health knowledge (Engelen et.al., 2020).
Field trip 02 is Scheduled on Saturday Week 05

Program Inputs

Trained Facilitators: A total 5 trained facilitators who are expertise in STD are recruited for this program. Each program component is carried out by one facilitator, with exception of PLS, which is carried out by two facilitators. The facilitators should have technical skills and at least 2 STD interventions under their belt.

Facilitator for

Condom Skills training workshop: Should have technical skills. He/She should be able to create a movie with a strong message about condom use. Should be in constant contact with Gynecologists and Urologists while creating a film and prepare animated power point presentations that will help Gynae and Urologist while presenting live lectures.

Positive Choice Mapping (PCM) intervention: Should help participants while they develop a “Map of Me”, map with include negative outcome expectancies of condom use, and HIV status guide map. Should work in correlation with a psychiatrist to modify cognitive representations and beliefs of the participants about condom use behavior.

Participatory Learning Strategy (PLS): This strategy requires two Facilitators. These facilitators should divide work in helping groups how to prepare and what points about screenings and STD stigma needs to be targeted during their role play as advocates. These facilitators will act as judges during participants role play. Facilitators should have strong communication abilities and should provide strong emotional and verbal support during “Stories of Hope” session.

Field Trip to Screening Center: Facilitators should be in constant contact with Grady Memorial Hospital, STD screening center staff and health care providers. The facilitator should prepare a power point presentation with all required data on STD, confidentiality of STD reports with help of Grady Memorial Hospital, STD screening center. Facilitator along with few staff members should take a tour around screening to help participants understand the standards procedures and benefits involved in STD screening.

Program Materials: Materials required for this program include 5 laptops one for each facilitator to store, and create information related to their tasks. 600 Condoms to be distributed among participants during each week of the program. One projector, one big screen, one printer, stationary materials such as papers, pens, staplers, etc. Program Application will be crated which all the participants need to download on their mobiles which has a minute-to-minute scheduling of the entire 6-week long program with constant reminders and messages.

Participants Incentives: After every program i.e., on Wednesday’s and Saturday’s nutritious dinner and lunch are provided for the participants, free condoms, minimum wages and free screening twice a year for two years at Grady Memorial Hospital, STD screening center to each

participant for their participations in program. According to Chin-Chun (2005), participatory incentives encourage participants to stay involved and committed to a program. Therefore, good incentive covering required aspects of program will help in better program outcomes which led me choose above incentives.

Facilities for Program Components: Access to Fulton High School student meeting rooms with projector and screen, dining area and at Grady Memorial Hospital, STD screening center with access to their lab testing rooms and meeting hall with a projector and screen is essential for the successful program completion.

Collaborating partners: This program works in Collaboration with Fulton Public House Restaurant and Fulton Georgia Cheesecake Factory which provides nutritious food for participants after each session. Other collaborating partners of this program include “Trojan” Condoms for free condom distribution after every session. We chose this “Trojan” brand because, it is the most trusted and used condom brand by most of the Americans.

Policy and Administrative Conditions

Policies

True Talk Free Condom Distribution Program

True talk is a no cost condom delivery initiative that aims at preventing Sexually transmitted Infections (STI), HIV and unintended pregnancies by making condoms readily available at no cost and free home delivery to all Fulton County residents (1). This program also encourages partners to communicate about their sexual health status, sexual history in order to negotiate condom use during sexual intercourse (1). Under this initiative condoms are delivered to Fulton County residents in discreet packaging where each package contains 20 male condoms of various brands and sizes with additional lube samples and resources related to sexual health for free of cost (1). According to CDC (2019), these structural level interventions of free condom distribution Program has shown to promote condom use, reduce STI/HIV infections, and save money. CDC (2019) also stated that Condom Distribution programs change the condom related environment in the County by making them more accessible, readily available for the residents. Therefore, True Talk Free Condom Distribution Program highly facilitates my program components aimed at Correct and Consistent condom use behavior which increases the attitude and self-efficacy of condom use by having condoms readily available whenever required.

Female Condom class III classification under section 513(f)(1) of the FD&C Act

When used correctly female condoms are 95% effective and male condoms are 98% effective in preventing HIV, STI, and Unintended pregnancies (Wilson, 2017). However, FDA has classified Female condoms under class III (Federal Register, 2018) under which medical devices like Pacemakers are approved whereas male condoms are classified under Class II devices under 21 CFR §884.5300 and §884.5310 (CDRH, 1998). The distinction in classification of male and female condoms makes difficult for companies to manufacture more female condoms due to fear of approval, which ultimately result in less availability of female condoms in market and their use. Moreover, females cannot always rely on male partner to use condoms to get protect herself from STI, but it would be more secured if she has her own condom. Therefore, Female Condom class III classification stands as biggest challenge in their availability in the market as male condoms. To overcome this challenge we will make sure to male participants to understand the psychological trauma that a female partner faces due to absence of female condoms and make sure that male partners use condoms to make their partners more secure and build a healthy relationships.

Wellstar Health Systems (North Fulton Hospital)

Organizational Mission: “You’re the reason we do what we do. We’ll never stop striving to improve your health and wellness, so you can live your very best life.”

Organizational Capacity

Facilitating issue: Wellstar Health Systems is the biggest not-for-profit health systems in state of Georgia. Wellstar Health Systems serve Fulton, Ga through North Fulton Hospital. Our organization thrives to provide easy access to care by staying involved in the communities to achieve and set standards of care Nationally. Our organization raises funds annually to invest in Charity care for eligible patients, Health screenings, Prevention and wellness programs. Wellstar health systems include 11 hospitals, 300+ medical office locations, 21 imaging centers, 5 health parks and many more in state of GA. Wellstar Health systems is a team of nearly 1,150 physicians, nurses, advanced technicians in more than 40 specialties which has gained the trust of millions of patients in state of Georgia and Fulton County. These unique and top characteristics of our organization will aid us in selecting skilled and experience facilitators for our program and high fund-raising capacity of Wellstar Health Systems will assist in financially uninterrupted program initiation to completion. Furthermore, North Fulton screening center will provide free screening services to participants involved in the program.

Challenging issues: The major challenging issue with Wellstar health systems is low employee retention and high employee turnover due to lowest paying health systems in metro Atlanta. This issue may result in facilitators turnover during midst of our program which may ultimately result in program failure. Therefore, to overcome this issue we have decided to offer wages to the facilitators and others involved in our program separately under program name, from the funds collected for this program rather than from Wellstar Health Systems. Another challenging issue is that there is a 10 min walk from the nearest bus station (North Point Pkwy@ Royal Dr) to North Fulton Health Center which might act as a barrier for few participants to visit screening center and may end up avoiding screening to avoid walking. Therefore, to overcome this issue we have decided to provide separate transportation from bus stop to North Fulton Health Center based on date and time of screening appointments to the program participants.

Partnerships

THRIVE SS: THRIVE SS is 5013c nonprofit health organization that works relentlessly to address sexual health issues among Men who have Sex with Men (MSM). THRIVE SS in collaboration with Fulton County Departments of Health and Wellness distributes free condoms and lubricants to population at risk in Fulton County. THRIVE SS acts as a potential partner for our program where it plays a lead role in distributing free male and female condoms of different sizes, brands and flavors that favors our behavioral determinants aimed at Correct and Consistent condom use during sexual intercourse.

Laboratory Corporation of America Holdings: Labcorp is the biggest global life science company with a mission to enhance health and life of people by providing world class diagnostic solutions, delivering innovative medicines faster to patients and utilizing technology to improve care delivery. Labcorp serves government agencies, hospitals, health systems, independent clinical laboratory, biopharmaceutical companies, etc. Labcorp is located in six locations in Fulton, Ga. Our potential partnership with Labcorp provides significant benefits both for us and our participants as they have access to latest technologies and share confidential reports of participants only with us and our participants can get screened at labcorp near to their location if they are far away from Wellstar North Fulton Hospital.

North Point Community church: North Point Community church located in Fulton, Ga is a non-denominational evangelical Christian megachurch. North Point has an average attendance of nearly 38,589 persons over eight locations in the Fulton County. Our collaboration with this church will enable us to educate 38,589 individuals about our program and its benefits, as well as solicit contributions for it. As a result, this aids us in raising funds to run our program successfully.

Other Collaborating partners: As explained earlier under “Program Inputs” this program collaborates with Fulton Public House Restaurant, Fulton Georgia Cheesecake Factory and Trojan condoms. As aforementioned under “Participants” this program also runs in collaboration with Sexual Health clinics in Fulton, Ga.

Final Summary Statement

Project “**PROTECT**” is designed to enhance the knowledge and behavior of Correct and Consistent use of Condoms and Frequent Screenings for STD, to decrease the STD incidence rates among African Americans of Fulton, GA aged 10-24 years. Through the program planning process, of project PROTECT first two sexual behaviors are identified based on scientific evidence. Through the evidence it was found that lack of diagnosis of asymptomatic STD, lack of knowledge about condom use and its importance were found to be the major sexual risk behaviors. Later through the evidence from the peer reviewed articles major determinants influencing these sexual behaviors are spotted. Program and its strategies were designed targeting the determinants related to condom use and screening behaviors. The strategies designed in this program were previously used successful strategies on other target population and were effective in obtaining the desired outcomes. Therefore, the most effective strategies of previously successful STD behavioral programs were first selected later they were shortened according to our programs determinants and four strategies were finalized best suited for our target population.

The evidence from peer reviewed articles about sexual behaviors, determinants and strategies is the greatest pillar of project PROTECT. The strength of our program includes our Organizational capacity and our partners in the program. Wellstar Health System is the leading and biggest health system in state of Georgia which stands as a strong pillar from our program initiation to completion. We have right partners invested in our program who can support us financially and emotionally for our program and each partner individually capable to take over the entire program if things go upside down. The weakness of our program includes addressing individuals’ attitude, perceptions and self-efficacy within six weeks and expecting forever change in behaviors in short span of time. The strategies used in designing our program were proven effective, and the participants involved in these strategies have shown a drastic change in their sexual behavior after participating in their respective program for months to years but our project PROTECT short time span of 6 week where time period of program is the greatest weakness of our program.

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