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Research Synthesis

COGNITIVE-BEHAVIORAL INTERVENTION TO REDUCE AFRICAN-AMERICAN ADOLESCENTS' RISK FOR HIV INFECTION

AUTHORS: ST. LAWRENCE, J.S., BRASFIELD, T.L., JEFFERSON, K.W., ALLEYNE, E., O'BANNON, R.E., SHIRLEY, A. (1995).

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Intervention Goal(s): To determine the effects of a small group intervention.

Intervention Setting: A public health clinic serving low-income families. §

Population: Of the 246 inner city African-American youths who enrolled in the study, 28 percent were male and 72 percent were female. The average age was 15 years; the average school grade was 10; and 36 percent were sexually experienced prior to the study.

Comparison Condition: Received Session 1 only.

Behavioral Findings: Youths who participated in the intervention reported significantly greater condom use and significantly lower frequency of unprotected intercourse than youths in the comparison condition. Abstinent youth who participated in the intervention significantly delayed sexual onset to a greater extent than abstinent youth in the comparison condition.



Description of Intervention: Becoming A Responsible Teen (BART)

This intervention is based on social learning theory and stresses attention to participants' informational needs, motivational influences, and behavior (IMB), from the IMB risk-reduction model. The intervention consisted of eight weekly educational and behavior skills sessions of 90 to 120 minutes each. Two co-facilitators, a male and a female, led the sessions in a small group format. The intervention was conducted in a comprehensive health center that serves predominantly low-income minority clients in a Mississippi city of 400,000 residents.

Session 1: AIDS education. HIV/AIDS information, presented in the context of local HIV/AIDS demographics, was interspersed with games, group discussion, and other activities.

Session 2: Sexual decisions and values. Group discussion about sexual decisions and pressures was followed by a video for African-American youths, *Seriously Fresh*, and video discussion.

Session 3: Technical competency skills. Discussion of statewide adolescent sexual activity levels was followed by condom use demonstrations, small group practice, and cognitive restructuring of unhelpful beliefs about self-protection and condom use.

Session 4-6: Social competency skills. Communication skills and assertiveness were taught in three contexts: a) initiating discussion about condoms in advance with a sex partner, b) refusing pressure to engage in unprotected sex, and c) sharing HIV-risk information with peers. Leaders demonstrated these skills, followed by participant role play.

Session 7: Cognitive competency skills. Local HIV-seropositive youths, the "Rap Team," discussed how HIV had affected their lives. Behavioral self-management and problem-solving strategies, especially those used successfully in the past, were the focus of sessions 7 and 8.

Session 8: Social support and empowerment. Participants shared what each felt was most helpful in BART and the personal changes each had made in response to participating in BART. The impact the group could have by educating friends and families was illustrated and the importance of supportive friendship networks was stressed.

Incentives included \$5 an hour for participation, a project T-shirt for attending all sessions, and a personalized certificate of completion.

Source: Centers for Disease Control and Prevention, HIV/AIDS Prevention Research Synthesis Project. Compendium of HIV Prevention Interventions with Evidence of Effectiveness. Atlanta, Ga.: Centers for Disease Control and Prevention: November 1999, Revised, [1-25]. §Information obtained from related reports or author.

For more information, call the technical assistance analyst at the Mississippi Urban Research Center, 1-866-JSU-MURC (578-6872).

