

SANKOFA FACT SHEET

Research Synthesis

REDUCTIONS IN HIV RISK-ASSOCIATED SEXUAL BEHAVIORS AMONG BLACK MALE ADOLESCENTS: EFFECTS OF AN AIDS PREVENTION INTERVENTION

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Target and Study Populations

Target Population. The intervention was developed for African-American inner-city male adolescents.

Study population. The intervention was evaluated with a sample of 157 inner-city African-American male adolescents from Philadelphia. They were recruited in 1988 from an outpatient medical clinic, high school assemblies, and the local YMCA. In the baseline assessment, about 34% had more than one sexual partner in the three previous months and only 30% had always used condoms. Few reported ever sharing needles, having receptive anal intercourse or having sexual relationships exclusively with males. Thus, their chief risk was through heterosexual activities. Their mean age was about 15 years; almost all were currently enrolled in school.

Objectives

<u>Intervention for Risk Behavior</u>	<u>Intervention for Determinants of Risk Behavior</u>
To reduce the frequency of intercourse.	To improve knowledge about HIV/AIDS prevention and transmission.
To reduce the number of partners.	To improve attitudes and intentions regarding safer sex behaviors
To increase condom use.	

Taxonomy Category and Intervention Description

Health education/risk reduction, group-level using non-peer facilitators.

The culturally and developmentally-sensitive intervention was a single, five-hour group session delivered on a Saturday at a local school. The facilitators (27) were all African-American, were both male and female, had a mean age of 36, and at least a college degree. Most had previous experience with small-group facilitation. One week before the intervention the facilitators received 6 hours of training. The intervention provided information about risks associated with intravenous drug use and specific sexual behaviors, addressed problematic attitudes, and provided opportunities to role-play for problem-solving. Videotapes, games, small-group discussions, condom exercises, and role-play were used to reinforce learning and encourage participation. A detailed description of the intervention is available from the authors.

Evaluation Methods

Participants were randomly assigned to receive the intervention (85) or a control session on career opportunities (72). A self-administered questionnaire was completed at baseline, before the intervention, immediately after the intervention, and again at three months after the intervention. A series of items assessing frequency of intercourse, condom use, number of sexual partners, and heterosexual anal intercourse was used to create a composite index of sexual risk behavior in the preceding three months. Composite indices were also created for intentions and attitudes toward engaging in each behavior in the next three months. The impact of the intervention was assessed with analysis of covariance, controlling for baseline assessments. Gender of facilitator was used as a factor.

Evaluation Findings

- ? The intervention was effective at reducing the practice of risky sexual behaviors. Specifically, in comparison to the control group, participants in the intervention showed statistically significantly less risky behavior at the three-month follow up on the overall baseline adjusted index of risky sexual behavior as well on measures of frequency of condom use, number of partners, and frequency of heterosexual anal intercourse.
- ? The intervention was effective at improving knowledge, attitudes, and intentions. Specifically, in comparison to the control group, participants in the intervention group showed statistically significantly lower baseline adjusted mean intentions to engage in the several risky behaviors, at both the immediate and the three-month follow up.
- ? The view that AIDS education encourages sexual activity among adolescents was not upheld. Participants who received the AIDS education were less likely than those in the career planning group to engage in sexual activity, and those who did were more likely to engage in safer sex.
- ? While the conclusions about effectiveness are the same for both male and female facilitators, the pattern of results is somewhat different. Immediate follow-up knowledge levels were higher for participants in the male-led groups; this advantage vanished at the three-month follow up. At the three-month follow up, those in female-led groups reported less risky behavior and had less positive attitudes toward risk behaviors than those in the male-led groups.

Source: <http://www.healthstrategies.org>. What Intervention Studies Say About Effectiveness, A Resource for HIV Prevention Community Planning Groups. Academy for Educational Development. Funding provided by the Centers for Disease Control and Prevention, Atlanta, Ga.

