# **CHAT INTERVENTION**

# Best Evidence - Risk Reduction

# INTERVENTION DESCRIPTION

# **Target Population**

• High risk heterosexual women and their social network

#### **Goals of Intervention**

- Promote positive sexual risk reduction norms within social networks
- Reduce the number of sex partners
- Increase condom use
- Reduce risky HIV-related drug behaviors
- Improve HIV/STI communication skills

# **Brief Description**

The *CHAT Intervention* is a group- and individual-level intervention consisting of five group sessions of 4 to 8 participants and a single individual session based on a harm reduction philosophy. This intervention focuses on training women as peer mentors to use specific communication skills with their social network members (family, friends, and sex partners) to discuss HIV and STI risk reduction. The four communication skills that represent the interventions acronym (CHAT) are: (1) Choose the right time and place; (2) Hear what the person is saying; (3) Ask questions; and (4) Talk with respect. The intervention is designed to promote risk reduction among the peer mentors through their interactions with network members.

#### **Theoretical Basis**

- Cognitive Dissonance
- Social Diffusion
- Social Learning Theory

- Social Identity Theory
- Social Influence
- Social Comparison Theory

#### Intervention Duration

• Six semi-weekly 2 hour sessions delivered over 3 weeks

# **Intervention Setting**

Unspecified

# **Delivery Methods**

- Discussion
- Goal setting
- Homework
- Interactive games
- Peer communication

# Deliverer

• Two female facilitators

- Personalized risk reduction plan
- Practice
- · Problem solving
- Role-play
- Skills demonstration

#### INTERVENTION PACKAGE INFORMATION

**Intervention package are available from Melissa A. Davey-Rothwell,** Department of Health, Behavior and Society, Johns Hopkins University, Bloomberg School of Public Health, 2213 McElderry Street – 2<sup>nd</sup> Floor, Baltimore, MD 21205, USA.

Email: mdavev@ihsph.edu for details on intervention materials.

# EVALUATION STUDY AND RESULTS

The original evaluation was conducted in Baltimore, Maryland between 2005 and 2010.

#### **Key Intervention Effects**

- Reduced number of sex partners
- Reduced unprotected sex†
- Reduced risky sexual behavior

# **Study Sample**

The baseline study sample of 169 women is characterized by the following:

- 98% black or African American, 2% white, 1% other
- 100% female
- 86% heterosexual, 12% bisexual, 2% gay
- Mean age of 43 years
- 49% completed less than high school diploma

# **Recruitment Settings**

Street outreach, health clinics and other local community agencies for index participants; Index participants recruited other subjects from their social networks

#### **Eligibility Criteria**

Women were eligible if they were age 18-55 years old, did not inject drugs in the past 6 months, had self-reported sex with at least one male partner in the past 6 months, had at least one high risk sex behavior (> 2 sex partners in past 6 months, had STI diagnosis in past 6 months, had high risk sex partner in past 90 days [i.e., injected heroin or cocaine, smoked crack, HIV seropositive or MSM]) and recruited at least one member from their social network.

#### **Assignment Method**

Index participants (N = 169) were randomized to 1 of 2 study arms: CHAT Intervention (n = 85) or a standard of care comparison (n = 84).

# **Comparison Group**

The standard of care comparison arm was delivered by a female facilitator to groups of four to eight women in one session, lasting about 2 hours. The comparison consisted of high quality voluntary HIV counseling and testing based on Project RESPECT followed by one 90 minute group session. The session included a didactic

# COMPENDIUM OF EVIDENCE-BASED INTERVENTIONS AND BEST PRACTICES FOR HIV PREVENTION

presentation focused on HIV and STI transmission and risk reduction information and ended with a game that synthesized the information.

# **Relevant Outcomes Measured and Follow-up Time**

• Sex risk behaviors (including number of sex partners; unprotected anal sex+; unprotected vaginal sex+; unprotected sex+ with main partner; unprotected sex+ with non-main partner during the past 90 days) were measured at 6, 12, and 18 month post-intervention follow-ups.

# **Participant Retention**

- CHAT Intervention
  - o 87% at 6 months post-intervention
  - o 89% at 12 months post-intervention
  - 80% at 18 months post-intervention\*
- Standard of Care Comparison
  - o 92% at 6 months post-intervention
  - o 88% at 12 months post-intervention
  - o 82% at 18 months post-intervention\*

# **Significant Findings**

- Intervention participants were significantly less likely to report two or more sex partners than comparison participants at 6 months post-intervention (Adj OR = 0.28, CI = 0.13, 0.63, p<0.01).
- Intervention participants were significantly less likely to engage in unprotected sex<sup>†</sup> with a non-main partner than comparison participants at 12 months (Adj OR = 0.36, CI = 0.16, 0.84, p<0.05) and 18 months post-intervention (AOR = 0.33, CI = 0.14, 0.79, p<0.05).
- At 18 months post-intervention, intervention participants were significantly less likely to engage in unprotected anal sex† (AOR = 0.24, CI = 0.09, 0.68, p<0.01), unprotected vaginal sex† (Adj OR = 0.47, CI = 0.25, 0.87, p<0.05), unprotected sex† with a main partner (AOR = 0.41, CI = 0.21, 0.77, p<0.01), and any high risk sexual behavior (defined as having any of the following four types of sexual risk behaviors in the past 90 days; 1) multiple sex partners 2) unprotected anal or vaginal sex† with any partner 3) risky sex partner who has injected drugs or smoked crack, had HIV or another STD, or male partners who had sex with other men or 4) exchanged sex)\* (AOR = 0.30, CI = 0.14, 0.64, p<0.01).

# **Considerations**

- Across all four time points including baseline, unprotected sex† with a non-main partner was significantly
  less likely among intervention participants than comparison participants (Adj OR = 0.59, CI = 0.36, 0.95,
  p<0.05).</li>
- Across all four time points including baseline, any risky sexual behavior was significantly less likely among
  intervention participants than comparison participants (AOR = 0.52, CI = 0.31, 0.85, p<0.05).</li>
- The recall period for the sex risk behaviors reported in Table 3 of the original report was actually during the past 90 days.\*

<sup>\*</sup>Information obtained from author

<sup>†</sup>Unprotected sex measured as sex without a condom

# REFERENCES AND CONTACT INFORMATION

Davey-Rothwell, M. A., Tobin, K., Yang, C., Sun, C. J., & Latkin, C. A. (2011). <u>Results of a randomized controlled trial of a peer mentor HIV/STI prevention intervention for women over an 18 month follow-up</u>. *AIDS and Behavior*, *15*, 1654-1663.

Researcher: Melissa A. Davey-Rothwell, PhD
Department of Health, Behavior and Society
Johns Hopkins University
Bloomberg School of Public Health
2213 McElderry Street – 2<sup>nd</sup> Floor
Baltimore, MD 21205

Email: mdavey@jhsph.edu

