ARCHIVED INTERVENTION

SISTERS SAVING SISTERS

Best Evidence - Risk Reduction

INTERVENTION DESCRIPTION

Target Population

• Sexually active African American and Latina adolescent female patients at family planning clinics

Goals of Intervention

- Eliminate or reduce unprotected sexual intercourse and number of sex partners
- Prevent new STD infections

Brief Description

The Sisters Saving Sisters intervention is a single-session, small group intervention to reduce risky sexual behaviors and STDs among African American and Latina adolescent girls. This intervention is culturally and developmentally appropriate, and is delivered to groups of 2-10 participants. Through the use of group discussions, videotapes, games and exercises, the intervention addresses beliefs relevant to HIV/STD risk reduction, illustrates correct condom use, and depicts effective condom use negotiation. Participants handle condoms, practice correct use of condoms with anatomical models, and engage in role playing to increase condom use negotiation skills. Participants also learn about their personal vulnerability to HIV, and barriers to condom use including alcohol and drug use.

Theoretical Basis

- Theory of Reasoned Action
- Theory of Planned Behavior
- Social Cognitive Theory

Intervention Duration

• One 250-minute session

Intervention Setting

• Adolescent medicine clinic

Deliverer

 African American women having at least a baccalaureate degree and experience working with inner-city adolescents

Delivery Methods

- Demonstrations
- Exercises
- Games
- · Group discussions

- Practice
- Role play
- Videos

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INTERVENTION PACKAGE INFORMATION

The intervention package and training are available through <u>Select Media, Inc.</u> under the name <u>Sisters Saving Sisters</u>.

EVALUATION STUDY AND RESULTS

The original evaluation study was conducted in Philadelphia, PA.

Key Intervention Effects

- Reduced unprotected sex
- Reduced number of sex partners
- Reduced frequency of sex with drugs or alcohol
- · Reduced new STD infections

Study Sample

The baseline study sample of 682 adolescent clinic patients is characterized by the following:

- 68% black or African American, 32% Hispanic/Latina
- 100% female
- 99% heterosexual, < 1% homosexual/bisexual
- Mean age of 16 years

Recruitment Settings

Adolescent medicine clinic in a children's hospital serving a low-income, inner-city community

Eligibility Criteria

African American and Latina female adolescents were eligible if they were clinic patients, sexually active, and not pregnant. Additionally, eligible participants had to speak English and be between the ages of 12 and 19.

Assignment Method

Adolescents (N = 682) were randomly assigned to 1 of 3 groups: Skills-based HIV/STD intervention (n = 235), HIV/STD information comparison (n = 228), or Health Promotion comparison (n = 219).

Comparison Group

- *Health Promotion* comparison received a single 250-minute session that covered beliefs and skills relevant to behaviors associated with risk of heart disease, cancer, and stroke. It emphasized food selection and preparation, physical activity, breast self-examination, cigarette smoking, and alcohol use.
- HIV/STD Information comparison received a single 250-minute session that covered information similar to the Skill-based HIV/STD intervention, but participants were not given the opportunity to practice skills.

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Relevant Outcomes Measured and Follow-up Time

- Sex behaviors during past 3 months (including unprotected sex, unprotected sex with drugs or alcohol, and number of sex partners) were measured at 3-, 6-, and 12-month follow-ups.
- New STD infections (including gonorrhea, Chlamydia, or trichomonas) were measured at 6- and 12-month follow-ups.

Participant Retention

- Skills-based Intervention
 - o 96% retained at 3 months
 - o 94% retained at 6 months
 - o 89% retained at 12 month
- HIV/STD Information comparison
 - o 92% retained at 3 months
 - o 90% retained at 6 months
 - o 86% retained at 12 months
- Health Promotion comparison
 - o 95% retained at 3 months
 - o 94% retained at 6 months
 - o 91% retained at 12 months

Significant Findings

Skills-based compared to Health Promotion:

- Skills-based participants, compared to Health Promotion participants, reported significantly fewer days of sex without condom use (p = .002) and significantly fewer days of unprotected sex while high on drugs or alcohol (p = .02) at the 12-month follow-up.
- Skills-based participants, compared to Health Promotion participants, reported significantly fewer sexual partners (p = .04) and were significantly less likely to report having multiple sex partners (p = .002) at the 12-month follow-up.
- Skills-based participants were significantly less likely to test positive for a new STD during the 12-month follow-up period than Health Promotion participants (p = .05).

Skills-based compared to HIV/STD Information:

 At the 12-month follow-up, Skills-based participants reported significantly fewer days of sex without condom use than HIV/STD Information participants (p = .03).

Considerations

- *Skill-based* intervention effects were not significant for condom use, number of partners, and new STD infections at the 3- or 6- month follow-ups.
- *Skills-based* participants, compared to *Health Promotion* participants, reported significantly fewer days of sex while high on drugs or alcohol at the 3-month (p = .03) and 6-month (p = .005) follow-ups.
- *Skills-based* participants, compared to *HIV/STD Information* participants, reported significantly fewer days of sex while high on drugs or alcohol at the 3-month follow-up (p = .03).

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REFERENCES AND CONTACT INFORMATION

Jemmott, J. B., 3rd., Jemmott, L. S., Braverman, P. K., & Fong, G. T. (2005). <u>HIV/STD risk reduction interventions for African American and Latino adolescent girls at an adolescent medicine clinic: A randomized control trial</u>. *Archives of Pediatric and Adolescent Medicine*, *159*, 440-449.

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