

E-WORTH (Empowering African American Women on the Road To Health)



Best-Evidence for the Risk Reduction Chapter

POPULATION

➤ Black or African American women who use/have used substances and are attending community supervision programs (CSPs)

KEY INTERVENTION EFFECTS

- Reduced sexually transmitted infections (STI)
- Decreased condomless sex

BRIEF DESCRIPTION

E-WORTH (Empowering African American Women on the Road To Health) is a group-based, culturally tailored HIV and STI prevention intervention designed to be delivered in low-resource community supervision programs (CSPs), the largest segment of the criminal justice system that includes probation, parole, and alternative-to-incarceration (ATI) programs. E-WORTH raises awareness of structural racism rooted in slavery and historical responses of resilience among Black or African American women.

The first session consisted of an orientation to E-WORTH and a 30-minute individual HIV testing session. Subsequent sessions were weekly group sessions consisting of individualized computer-based interactive activities with Black women characters that included:

- awareness about HIV/STI risks
- condom use technical skills
- sexual negotiation skills
- risk reduction goal setting
- social support and linkage to services
- intimate partner violence (IPV) screening, safety planning, and referral to IPV services

Condoms were also made available to both intervention and control groups.

DURATION: One 60-minute session and four 90-minute sessions delivered over four weeks

SETTING: Two sites at a community-based organization that serves CSPs (New York City, New York)

STUDY YEARS: 2015 – 2019

STUDY DESIGN: Hybrid type-1 randomized controlled trial (RCT)

DELIVERERS: Trained Black or African American female facilitators

DELIVERY METHODS: Computer/technology based, HIV testing, Plan development, Referrals, Skills building, Social support

STUDY SAMPLE

The baseline study sample of N = 352 Black or African American women is characterized by the following:

- 100% Black or African American persons
- 22% persons who identify as Hispanic or Latina, regardless of race
- 100% female persons
- 63% heterosexual persons
- 31% bisexual persons
- Mean age of 32 years

STRUCTURAL COMPONENTS

There are no structural components reported for this study.

KEY INTERVENTION EFFECTS (see **Primary Study** for all outcomes)

- At the 12 month follow up, intervention participants were less likely to test positive for any STI than control participants (Odds Ratio [OR] = 0.46; 95% Confidence Interval [CI]: 0.25 - 0.85).
- Over the 12 month follow up period, intervention participants reported fewer total acts of condomless sex in the prior 90 days (IRR = 0.62; 95% CI: 0.39 - 0.97) and fewer condomless sex acts with their main partners in the prior 90 days (IRR = 0.58; 95% CI: 0.36 - 0.92) than control participants.
- Over the 12 month follow up period, intervention participants reported a higher proportion of protected intercourse across all sexual partners ($b = 0.11$; 95% CI: 0.03 - 0.19) and with their main sexual partners ($b = 0.11$; 95% CI: 0.02 - 0.19) than control participants.
- Over the 12 month follow up period, intervention participants were more likely to always use condoms with all sexual partners (OR = 2.11; 95% CI: 1.12 - 3.97) and with their main sexual partners (OR = 1.97; 95% CI: 1.06 - 3.69) than control participants.

*All outcomes adjusted for: age, high school education, employment status (employed full-time or part-time vs not employed), marital status (married or common-law vs single), any confirmed STI at baseline, and baseline measure of the outcome.

CONSIDERATIONS

- None reported

ADVERSE EVENTS

- The author did not report adverse events.

FUNDING

- National Institute on Drug Abuse (R01DA038122)

PRIMARY STUDY

Gilbert, L., Goddard-Eckrich, D., Chang, M., Hunt, T., Wu, E., Johnson, K., Richards, S., Goodwin, S., Tibbetts, R., Metsch, L. R., & El-Bassel, N. (2021). [Effectiveness of a culturally tailored HIV and sexually transmitted infection prevention intervention for Black women in community supervision programs: A randomized clinical trial](https://doi.org/10.1001/jamanetworkopen.2021.5226). *JAMA Network Open*, 4(4), e215226. <https://doi.org/10.1001/jamanetworkopen.2021.5226>

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