

PREGNANCY PREVENTION INTERVENTION IMPLEMENTATION REPORT

Program Name: *SiHLE-Sisters, Informing, Healing, Living, Empowering*

Developers:

Ralph DiClemente, Gina Wingood, Kathy Harrington, Delia Lang, Susan Davies, Edward Hook III, M. Kim Oh, Richard Crosby, Vicki Stover Hertzberg, Angelita Gordon, James Hardin, Shan Parker, & Alyssa Robillard

Program Description and Overview

SiHLE is an adaptation of the *SISTA* intervention developed by the Midwest Prevention Intervention Center of the African American Prevention Network (MPIC-APIN) in St. Louis. It is a peer-led, group-level, social-skills training intervention designed to reduce sexual risk behaviors among African-American female teenagers who are at high risk of HIV. In addition to HIV prevention, the program addresses relationships, dating and sexual health within the specific context of the female African-American teenage experience, drawing upon both cultural and gender pride to give participants the skills and motivations to avoid HIV and other STDs.

Core Components

Content Components

- gained increased knowledge about HIV transmission and risk reduction strategies
- developed assertive communication skills to demonstrate care for their partners and to negotiate abstinence or safer sex behaviors (particularly condom use)
- practiced proper condom use skills as well as developed positive attitudes, norms and self-efficacy about consistent condom use
- developed an understanding of characteristics of healthy and unhealthy relationships and the triggers that make negotiating safer sex challenging for teens
- gained a sense of empowerment and self-efficacy, based on cultural and gender pride

Pedagogy Components

- *SiHLE* is delivered by a team of one adult and two peer facilitators who, like the participants, are African-American and female.
- Peer facilitators are between the ages of 18 and 21 — slightly older than the participants.
- Review of previous information is built in throughout the sessions to reinforce knowledge and offer opportunities for questions to be answered.

Implementation Components

- Sessions are held in a community-based setting for small groups of between 10 and 12 participants.

Target Population

Target population evaluated

- The target audience for *SiHLE* is heterosexual African-American female teenagers between the ages of 14 and 18 who have had sexual intercourse and are at risk for HIV.

Program Setting

Program setting evaluated

- Local health department

Program Duration

The program is delivered in four sessions with 6 month and 12 month follow up sessions.

Curriculum Materials

Curriculum materials are available from Sociometric Corporation Program Archive on Sexuality, Health, and Adolescent (PASHA) at <http://www.socio.com/passt23.php>.

Adaptations

None noted by the developer.

Program Focus

SiHLE focuses on HIV and STD prevention.

Research Evidence**Study Citation:**

DiClemente, R. J., Wingood, G. M., Harrington, K. F., Lang, D. L., Davies, S. L., Hook, E. W., et al. (2004). Efficacy of an HIV prevention intervention for African American adolescent girls: A randomized controlled trial. *JAMA*, 292(2), 171–179.

Study Setting:

Saturday program at a family health clinic in the southern United States

Study Sample:

522 African American adolescent girls recruited from four community health agencies

- Age range 14 to 18 years (mean age 16 years)
- All sexually experienced

Study Design:

Randomized controlled trial. Study participants were randomly assigned to either a treatment group that received the intervention or a control group that received a general health promotion intervention on nutrition and exercise. Surveys were administered immediately before the intervention and at follow-ups conducted 6 and 12 months after the intervention. Biological testing for chlamydia, gonorrhea, and trichomonas was also conducted.

Study Rating:

The study met the review criteria for a **high** study rating.

Study Findings:

Six months after the intervention:

- Adolescents participating in the intervention were significantly less likely to report having a pregnancy and significantly more likely to report consistent condom use in the past 6 months.
- Adolescents participating in the intervention were significantly more likely to report having used a condom during last sex, reported a significantly higher percentage of condom-protected sexual intercourse acts during both the past 30 days and the past 6 months, and reported significantly fewer episodes of unprotected sexual intercourse during both the past 30 days and the past 6 months.
- The study found no statistically significant program impacts on consistent condom use in the past 30 days.

Twelve months after the intervention:

- Adolescents participating in the intervention were significantly more likely to report consistent condom use in the both the past 30 days and the past 6 months.
- Adolescents participating in the intervention were significantly more likely to report using a condom during last sex, reported a significantly higher percentage of condom-protected sexual intercourse acts during both the past 30 days and the past 6 months, and reported significantly fewer episodes of unprotected sexual intercourse during both the past 30 days and the past 6 months.
- The study found no statistically significant program impacts on self-reported pregnancy in the past 6 months.

Across the six- and twelve-month follow ups:

- Adolescents participating in the intervention were significantly less likely to have a chlamydia infection.
- The study found no statistically significant program impacts on gonorrhea or trichomonas infections.

The study also examined program impacts on measures of HIV knowledge, condom attitudes, barriers to condom use, partner communication, condom-use self-efficacy, and condom-use skills. Findings for these outcomes were not considered for the review because they fell outside the scope of the review.

Last Updated: 05/31/12