HIV prevention and participatory program strategies for youth: Are voice, choice, decisionmaking, and opportunities for personal development linked to risk reduction practices?

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Youth involved in pilot study – spring 2006

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## Background

- HIV prevention programs often use participatory strategies, including active engagement of youth in decision-making.
- Measures of active program participation are generally used to assess/evaluate program processes rather than specific health-related impacts.
- Our study examined program participation in relation to HIV risk reduction practices.

# Youth in New York State: Too many becoming infected with HIV, too few accessing care

Estimated number of new infections each year in people aged <25 in New York State	3,600 US total: 40,000 NYS share: 18% Percentage in youth: 50%
New HIV/AIDS diagnoses reported during 2004 in people aged <25 in NYS	<b>716</b> (includes 34 diagnoses in children <13)
Percentage of estimated number of new HIV infections in people aged <25 in NYS that are diagnosed	20% (one in five)
Estimated number of new infections not diagnosed if projections are accurate	2,884

#### Methods

- Drafted an eight item scale regarding young people's influence/voice within programs and program-generated opportunities for personal development
- Piloted the scale with 98 youth involved in four state-funded adolescent HIV prevention programs
- The scale was well received and viewed as valid by youth involved in the study.

#### Items included in scale

- Adults in the program listen to what I have to say.
- I help decide things like program activities or rules.
- I feel I have a lot of voice/power to influence decisions about the program.
- I am very involved in program activities.
- The program's activities are challenging and interesting.
- I learn a lot from participating in the program.
- I think that participating in the program will help me to get a job.
- I think that participating in the program will help me to continue my education.

(Response scale: 1 = strongly agree...5 = strongly disagree)

#### Evaluation of the scale

- Confirmatory factor analysis
- Reliability analysis (Cronbach's alpha was 0.86 for the overall sample, and ranged between 0.73 and 0.91 when sub-samples from the four programs were analyzed separately)
- Assessment of construct validity (interitem correlations: 0.34 0.73; item-total correlations: 0.54 0.69)
- Youth-Adult data interpretation meetings

#### Results

Active program participation correlated with

- Reported sexual risk reduction practices during the past year (r = 0.34, p = .001)
- Reported sexual risk reduction practices during the past three months

$$(r = 0.30, p = .004)$$

 A summary scale of sexual and drug related risk reduction practices

$$(r = 0.24, p = .031)$$

# Relationship of quality of participation with past year risk reduction practices [observed/(expected)]

Gender	Risk reduction	High participation	Low participation	Total
Male	No sex or consistent condom use	7 (5.8)	8 (9.2)	15
	Inconsistent condom use (0 – 75%)	3 (4.2)	8 (6.8)	11
Female	No sex or consistent condom use	26 (21.7)	16 (20.3)	42
	Inconsistent condom use (0 – 75%)	6 (10.3)	14 (9.7)	20
Total		42	46	88

Relationship of quality of participation with past year risk reduction practices [observed/(expected)]

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Age	Risk reduction	High participation	Low participation	Total
13-15	No sex or consistent	15	15	30
	condom use	(15)	(15)	
13-15	Inconsistent	0	0	0
	condom use (0 – 75%)			
16-17	No sex or	10	7	17
	consistent	(8.5)	(8.5)	
	condom use	( )		
16-17	Inconsistent condom use	4	7	11
	(0 – 75%)	(5.5)	(5.5)	
18-24	No sex or	7	3	10
	consistent condom use	(4.3)	(5.7)	
18-24	Inconsistent	6	14	20
	condom use (0 – 75%)	(8.7)	(11.3)	
Total		42	46	88

#### Conclusions

- Higher levels of participation correlated with less risk taking.
- The scale measuring active participation was reliable and easily administered.
- Longitudinal study is needed to demonstrate causal relationships between active participation and HIV risk reduction.
- Nonetheless, our pilot study data suggests that highly participatory programs hold potential to enhance young people's capacity to practice safer behaviors.

### Next steps

- Larger exploratory study supported by the National Institute of Nursing Research (1R21NR9764-01A1)
- Baseline, 6-month and 12-month surveys of 300 13-17 year olds in 8 NYC programs
- Scales addressing program climate, mesosytems, intensity and duration of involvement combined with participation scale to generate global scale measuring program participation characteristics

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