

Rompe El Silencio: Creating an Intergenerational HIV/AIDS Prevention Program for Latino Families



Britt Rios-Ellis, PhD, MS¹, Kevin Malotte, DrPH², Carol Canjura, BA²,
Laura Hoyt D'Anna, DrPH¹ & Melawhy Garcia, BS¹

(1) NCLR/CSULB Center for Latino Community Health

(2) Center for Health Care Innovation, California State University, Long Beach

Funded by the Office on Women's Health

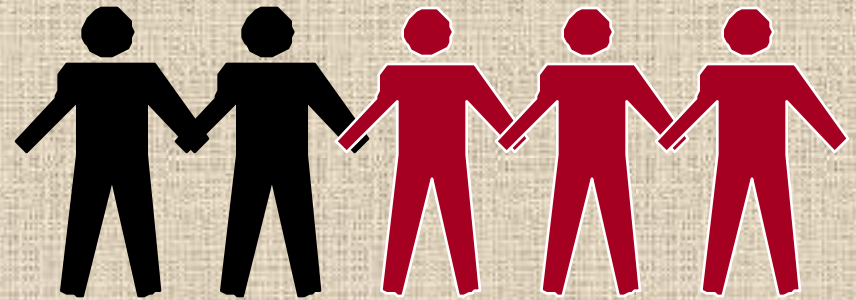


Background



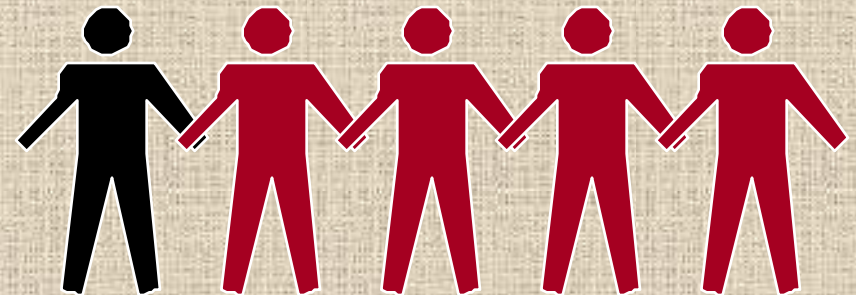
Minorities of Color and HIV

3 of every 5 new AIDS cases in men were among minorities (63%)¹



4 of every 5 new AIDS cases in women were among minorities (81.9%)²

4 of every 5 new AIDS cases in children were among minorities (85.6%)³



¹National Minority AIDS Council

²HIV/AIDS Surveillance Report, 2005. Vol. 17 Rev ed. Atlanta: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention

³Ryan White Comprehensive AIDS Resource Emergency (CARE) Act. 2003.

Latinos and HIV: Current Trends

- HIV/AIDS rate is more than 3 times higher among Latinos than Whites
- The percentage of new AIDS cases among Latinos has increased in the last 15 years¹
- Many Latinos receive an AIDS diagnosis within 12 months of learning their HIV status²
- HIV transmission occurs more frequently among Latino males because of male-to-male sexual contact and among Latino women through heterosexual contact³

1. Centers for Disease Control and Prevention, *HIV/AIDS Surveillance Report*, June 2002.

2. Centers for Disease Control and Prevention: *Late versus early testing of HIV – 16 sites, United States. 2000-2003. MMWR 2003, 52:581-586.*

3. Levy V. et al.: *HIV-related risk behavior among Hispanic immigrant men in a population-based household survey in low-income neighborhoods of Northern California. Sex Transm Dis. 2005;32:487-490.*

Current Trends continued...

- CDC data show that Latinos were the only minority group to demonstrate a doubling of HIV infection due to heterosexual infection between 2001 and 2005
 - 5% to 11% for males & 23 to 51% for females
- Research in rural Mexico has indicated that marriage is the most influential risk factor for women

Latina Women at Risk

Traditional gender roles

- Predetermined roles and family pressures¹
- Infidelity as part of the male social role and passive acceptance by female partners²
- Stigma³
- Gender inequity⁴
- Domestic violence¹
- Machismo/homophobia¹



1. Galanti. *J Transcult Nurs.* 2003;14:180-185.

2. Flores-Ortiz, Y. (2005).

3. Hirsch JS. *Am J Public Health.* 2002;92:1227-1237.

4. Marin BV. *J Transcult Nurs.* 2003;14:186-192.

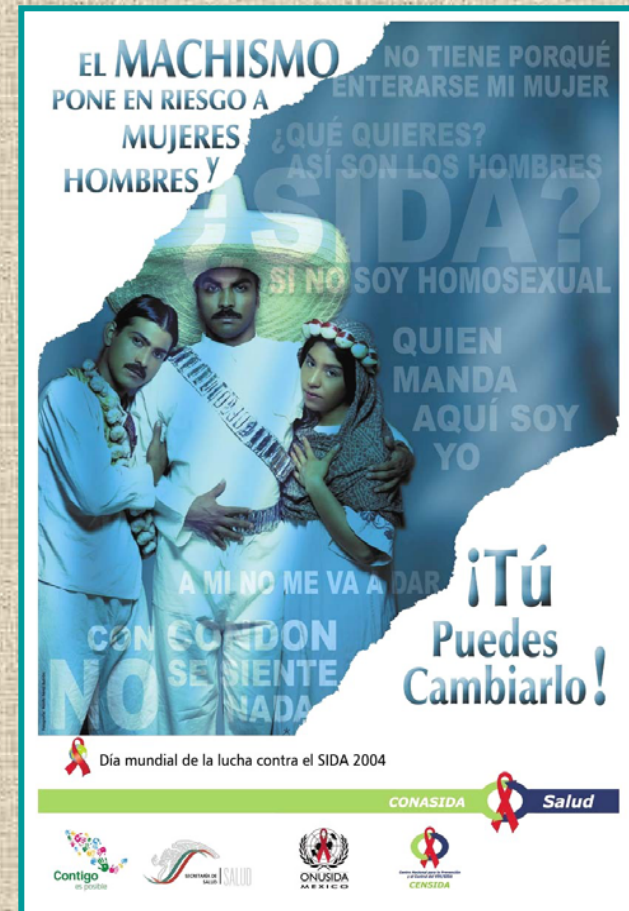
5. Murphy DA, et al. *AIDS Care.* 2003;15:217-230.

Poster: YWCA/WINGS—Shelter services for victims of domestic violence.

High-Risk Groups

- Heterosexually identified men who have sex with men but do not tell their female partners¹
 - Don't "subscribe" to gay subculture
 - Usually unaware or non-disclosing of their HIV status
 - MSM behavior could be referred to as contextual or incidental
- Bisexual activity

65% of young men who had ever had sex with men also reported having sex with women²



Poster: Public domain. Mexican National Campaign against machismo and homophobia. 2004.

1. Millett G. 11th CROI, San Francisco 2004, #83.

2. Valleroy LA, MacKellar DA, Behel SK, Secura GM, Young Men's Survey. The Bridge for HIV transmission to women from 23 to 29 year-old men who have sex with men in 6 US Cities

Program Methods



Methods

The Women and Intergenerational HIV/AIDS Prevention Project sponsored by the Office on Women's Health (OWH) was designed to:

- Assess the barriers to communication regarding sexuality and HIV/AIDS among Latinas
- Increase HIV/AIDS-related communication among Latinas of diverse ages
- Create opportunities for HIV prevention education and testing within communities
- Develop an effective model and curriculum to be used to educate Latinas regarding the risk of HIV and AIDS

Phase One

- Working with community partners
 - For the activities that are the focus of this talk, we worked with AltaMed Health Services and the East Los Angeles Women's Center
- The first phase of the project included several focus groups in Spanish and English targeting Latinas of diverse age groups
 - 8 focus groups were held with Latinas aged 12-15, 16-19, 20-35, 36-50, 51 and above
 - Focus groups were either held in English, Spanish or in both languages
 - Only the young groups of Latinas preferred English
 - An additional focus group was held with HIV positive Latinas

Focus Group Findings

- Among Mature Women
 - Were worried most about Latino youth's HIV risk, particularly regarding the differences in what their children would encounter living in the US
 - Expressed a desire to be in life situations in which they would be in greater control and less risk for HIV
 - Stated that the risk often centered around their male partner's behaviors and that women have little control of what their male partner's do
 - Wanted to know more about their bodies and how they function and thought that these topics should be integrated into HIV/AIDS prevention
 - Were very willing to undergo HIV testing at the time of the focus group

Focus Group Findings

- Adult participants stated they avoid communication with children about sex
 - Embarrassed
 - Did not have “the talk” with their own parents
 - Lack knowledge

Focus Group Findings

- Among Young Women
 - Did not want to have to experience what their mothers had endured. The young women wanted specifically
 - Not to have children until after 25 years of age
 - To have a college degree
 - To have a nice car
 - To have a husband that views them like a partner, and is willing to share the household and childrearing responsibilities

Focus Group Findings

- Among Young Women
 - Stated that there was little communication about sex and HIV/AIDS at home and that they were often told by their parents that
 - “You will learn that in school”
 - “You are too young” to learn/talk about sex
 - Youth also avoid communication with parents, often due to fear of parents’ reactions
 - Parents would become accusatory/suspicious – “Why are you asking? Are you having sex?”
 - Do not know how to initiate conversation
 - Were less willing than the older women to undergo HIV testing at the time of the focus group
 - Most reported that they had not yet had sex and were not at risk¹⁴

Planning the Intervention

- Several meetings were held with our community advisory group in an effort to plan an intervention that
 - Would be highly enjoyable and informative for all participants
 - Would build on findings from the focus groups
 - Would optimize each session's content and activities to make the best and most efficient use of participant's time
 - Would incorporate the positive aspects of *familismo* to ensure that the activities built on increasing family communication
 - Would be held at times and locations that would facilitate consistency of attendance

Planning the Intervention

- We incorporated activities and content used in prior interventions of this sort where appropriate
 - SISTA (Sisters Informing Sisters About Topics on AIDS)
 - SIECUS “Families Are Talking”
 - Our prior interventions
- OWH requested at least a four session intervention
 - It was deemed difficult for all participants to attend four sessions so we decided to hold the four session intervention over two days to optimize attendance and completion of all sessions

Initial Pilot of the Intervention

- To increase intergenerational communication regarding HIV/AIDS and sexuality
 - Latina family member dyads representing two distinct generations were recruited to participate
 - The majority were mother-daughter, followed by aunt-niece dyads
 - All youth had to be at least 12 years of age to participate
 - All youth 12-17 years of age had to have parental signed consent and assent forms to participate
 - Participants agreed to commit to two time spans of four hours each in addition to a brief orientation session
 - Participants agreed to provide their feedback through oral and written evaluations at the end of the sessions
 - Participants agreed to be willing to examine sexual communication barriers/facilitators as part of the intervention

Initial Pilot Phase Participants

- 9 mothers
 - Average age 43 (range 35 to 52)
 - 7 from Mexico, 2 from Nicaragua
 - Average time in the US was 21 years (range 6 to 30 years)
 - All had tested for HIV
- 10 daughters & 1 niece
 - (average age 14.6 years, range 12 to 18)
 - All but one participant was born in the US
 - All participants spoke Spanish and English
 - 9 reported being more comfortable speaking English
 - None had been tested for HIV, 2 did test during their participation in the pilot

Intervention Revision

- Participants reported primarily positive responses to curriculum especially for interactive activities
 - Adult participants in particular expressed surprise with daughters' responses during discussion activities
 - The adults felt the youth would be less engaged, less knowledgeable and less perceptive of the issues in their families' lives
- After initially piloting the intervention with these participants, feedback from the participants, from the community partners and the community advisory group, and from the intervention facilitators was used to revise the intervention content and activities
 - Added more activities to address youths' shorter attention spans and create breaks between more didactic sections and provide opportunities to initiate discussions between family pairs
- The following slides give an outline of the current intervention

Orientation Session

- During the orientation session:
 - Participants sign informed consent and assent forms (for underage participants)
 - An overview of the entire intervention is presented
 - The needed time commitment is clarified
 - Efforts are made to get to know participants and build *confianza* (trust)

Session One Content & Activities

- Entre Madre e Hija (Between Mother and Daughter) Activity
- Defining and analyzing different types of communication
 - Aggressive, passive, passive-aggressive, assertive, fatalistic, being judgmental, blaming, transferring, ordering, threatening, listening, affirming, reflective listening, extending, etc...
- Latino cultural perceptions of sexual communication and barriers to honest communication
- Role play activity between mothers and daughters
- Dichos (common sayings) and sexual communication
- Reflection on the importance of open communication between parents and their children around sexuality
- Recognition that each human being is sexual from birth through adulthood

Session Two Content & Activities

- Examination of the origin of our sexual values
 - What messages did you receive about sexuality as you were growing up?
 - What effects have these messages had on your life?
 - Where did you learn about sex? How did the media affect what you learned?
 - How do you define sex and sexuality?
- Understanding homosexuality: An overview
- Overview of reproductive anatomy
- HIV 101
- Overview of Latinos and HIV/AIDS
- Making a commitment to stay healthy and continue the training

Session Three Content & Activities

- Define the risk of HIV among Latinas
- Discuss factors that increase risk, such as other STIs
- Understanding the impact of infidelity on a Latina's HIV risk
 - How to effectively address the impact of infidelity in their lives
- Examination of women's roles in Latino culture-how they help and how they hurt
- Understanding and clarifying what participants want in a partner

Session Four Content & Activities

- Committing ourselves to prevention
- Understanding increased risk for STIs
- Participant activity addressing their plans for self protection and how to help others in the family prevent infection
- Condom demonstration and role play
- Negotiating condom use
- Understanding and effectively confronting sexual assault and related issues
- Promises and values activity
- Evaluation of *Rompe El Silencio* intervention

Pilot Phase Continuation

- Our second stage of pilot testing will involve an additional 65 young and mature Latina female dyads in Paramount and Long Beach, California (n=130 women)
- We will be conducting one month follow up calls to determine
 - How frequently participants have talked about sex in the family since the intervention, and if they have talked, the topics they have discussed
 - Comfort level talking about sex with family members and partners
 - Perceived skills in talking about sex with family members and partners
 - Other ways that participation in the intervention affected them



¡Mil Gracias!

Thank You!