An American Sign Language HIV Video Survey for Deaf Adolescents

Marjorie F. Goldstein, PhD Patrice Joyner, MSW Elizabeth Eckhardt, PhD Roberta Berry, MFA

Deaf Research Projects National Development Research Institutes, Inc. New York, NY

Funded by National Institute on Deafness and Other Communication Disorders

Grant Number: 5 R01 DC007868-03

Introduction

 Essential to survey all subpopulations who might be at risk of acquiring HIV.

• To determine their HIV knowledge, attitudes and risk behaviors.

Difficulties surveying deaf populations:

 American Sign Language (ASL) has no written form.

 ASL has a syntax and grammar unlike English. Some deaf persons read poorly.

May not understand English idioms.

 Deaf culture has norms which differ from the majority hearing culture. The problem: How to survey deaf youth about their HIV knowledge and risk.

- Deaf youth are:
 - at risk as are hearing youth.
 - have fewer sources of information about HIV.

 Historically deaf schools had lower levels of sex education than others.

 Deaf youth have fewer opportunities than others to learn about HIV.

Objective:

 To develop a method for surveying deaf adolescents who use ASL as their main mode of communication about their HIV knowledge, attitudes, and risk behaviors.

Study Methods

 We developed a bilingual, selfadministered Video Survey available in ASL and written English on laptop computer.

Survey Creation

- Item selection from relevant domains
 - (e.g. demographics, deaf identity, drug and alcohol use, HIV knowledge, HIV stigma, sexual risk behavior).
- Translation of items into ASL by a translation team.
- Expert review and back translation.
- Conduct focus groups to review translations.

- Analysis of focus group transcripts, expert ASL review, back translations.
- Revision of some items
- Create final ASL and English 'scripts'.
- Hire sign models.
- Digital videotaping.
- Programming of survey.

Survey Screen



Copyright 2007, Marjorie F. Goldstein, goldstein@ndri.org

Survey Implementation

- Establish contact with high school for the deaf throughout US.
- Obtain school approvals.
- Establish school liaisons to arrange logistics and obtain parental consent/student assent.
- Travel with laptops to each school to administer survey.

Preliminary Results N = 157**Demographics:** Number of schools: 5 Mean age: 17.7 yrs Range: 14 - 21.7 yrs Median :18 yrs



Demographics:

Racial Identity	Percent
African- American	22%
Hispanic	15%
Asian	7%
White	40%
Native American	3%
Mixed	9%

Sexual Identity	Percent
Straight	78%
Gay/Lesbian	4%
Bi-Sexual	7%
Don't know/ Unsure	11%

HIV Knowledge:

HIV Knowledge Scale score (13 items) Mean: 6.9, Range: 0-13, Median: 7.0

- Can deaf people get HIV?
- Can a man's semen contain HIV?
- Can a woman's vaginal fluids contain HIV?
- Can a pregnant woman who has HIV pass it on to her newborn baby?
- Can a woman give HIV to a man during vaginal intercourse without a condom?

- Can a man give HIV to a woman if they are having sex without a condom?
- Can you tell if a person has HIV by looking at him?
- If a person becomes sick with AIDS at age 21, could that person have gotten HIV when they were a teenager?
- Can condoms prevent HIV?
- Can a person get HIV from sharing a needle with a drug user who has HIV?
- Can a man with HIV pass it on to another man through sexual intercourse?
- Is there now effective medicine to treat HIV?
- What comes first HIV or AIDS?

Sources of HIV Information:

Sources:	Percent reporting:
School	75%
Friends	55%
Family	45%
Internet, newspapers,	64%
magazines	
Television	47%

•Students could report up to 5 sources.

•The more sources named, the higher the knowledge score (except TV).

•Each named source raised the score by one point, except "internet, newspapers, and magazines" which raised the score 2 points. In another question, 72% reported receiving HIV prevention information in school.

 If this question is considered alone, it is a significant predictor of HIV knowledge score (p<.01).

Risk Behavior:

- 62% reported some sexual experience.
- 23% reported having had anal sex.
- Students identifying as gay or bisexual were more likely to report this behavior
- 15% reported having a sexual partner who is 5 or more years older.

Conclusion:

- HIV knowledge is low among deaf high school students attending high schools for the deaf.
- In our sample, 75% reported learning about HIV in school as compared to a national average of 88%.¹
- Rates of sexual activity are comparable to those in the hearing population, given the older age of our high school students.¹
- Grunbaum, J., Kann, L., Kinchen, S., Ross, J., Hawkins, J., Lowry, R., et al. (2004, May 21) Youth Risk Behavior Surveillance United States, 2003. *MMRW*. Retrieved July 19, 2007, from http://www.cdc.gov/mmwr/preview/mmwrhtml/ss5302a1.htm#top

- The methodology may have application to other low literacy populations.
- With the addition of sound for hearing populations, this method could be used to deliver oral surveys with the support of pictures and graphics.
- A survey in multiple languages could be stored on a single computer.

 This survey method is standardized, self-administered, and private yet interactive with a videotaped "interviewer".

 Technology provided a solution to meeting the needs for a survey of deaf youth. In the future, we hope to see other applications of this type of survey.