

What works to prevent HIV among heterosexual African-Americans?

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Behavioral HIV prevention interventions targeting heterosexual African Americans that are proven to work require several key characteristics, according to UCSF researchers.

"Peer education, skills training and cultural tailoring were critical factors we found in interventions that reduced HIV risk behaviors and led to lower rates of sexually transmitted infections," said study lead author, Lynae Darbes, PhD, assistant professor of medicine at UCSF's Center for AIDS Prevention Studies and Global Health Sciences.

The results, published in the June 19th issue of the journal "AIDS," were based on a meta-analysis of 38 randomized controlled trials involving over 14,000 participants.

"It is important to recognize the diversity that exists within the African American community, and we are not recommending 'one size fits all' types of interventions. Successful interventions honed in on specific aspects of the target populations," said Darbes.

For instance, the social norms targeted may include influencing one's perception of being at risk for HIV in one population, delaying sexual initiation in another or reducing the number of partners in another or some combination of all of these, she said. In addition, actual members from the target population should conduct peer education.

[&]quot;Cultural tailoring was crucial and in effective interventions was derived



from activities such as formative research within the target community using a 'ground up' approach as opposed to a top down or 'parachute' approach. Understanding the community was important in developing efficacious interventions," said Darbes.

The study's meta-analysis focused on randomized controlled trials that measured outcomes such as changes in rates of unprotected sex, consistency of condom use or sexually transmitted infections and reported at least one outcome post intervention.

"This study shows how the technique of meta-analysis can be used to understand an entire literature and to find subtle but important associations that single studies simply can't find," said study co-author, George W. Rutherford, MD, director of UCSF Global Health Sciences Prevention and Public Health Group.

Source: University of California - San Francisco

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