

## Culturally tailored intervention boosts safe sex, reduces drinking among young Black women

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A series of weekend workshops that integrate strategies for both reducing risky alcohol use and preventing sexually transmitted infections (STIs) led to an increase in safe sex and decrease in drinking among young Black women, according to a new study published in the *American Journal of Preventive Medicine*.

"By designing an intervention that didn't treat sex and alcohol use as two separate risk factors, <u>young women</u> were empowered to make healthier decisions and better communicate with their partners," said Ralph DiClemente, professor and chair of the Department of Social and Behavioral Sciences at NYU School of Global Public Health and the study's lead author.

"This groundbreaking study illustrates the power of contextualizing issues of safe sex, alcohol use, and STIs, within the reality of young African American women's lives. Future research aimed at addressing these stigmatized public health issues may benefit by addressing sociocultural determinants of health," said Gina Wingood, the Sidney and Helaine Lerner Professor of Public Health Promotion at Columbia University's Mailman School of Public Health and the study's senior author.

Alcohol use can increase <u>sexual risk</u>-taking, elevating the chance of getting or spreading STIs, including HIV. Black women are at



disproportionately greater risk for STIs than women of other racial and ethnic backgrounds.

DiClemente and colleagues previously developed a culturally tailored sexual health intervention named Horizons, which the Centers for Disease Control and Prevention designated a "best practice," evidence-based HIV prevention program. Using modeling and role play, Horizons increases STI and HIV knowledge while building assertive communication skills and instilling gender and ethnic pride among young Black women.

When studying Horizons, DiClemente and Wingood found that it was effective at reducing STIs, but much less so among young women who consumed alcohol. So, they modified the workshops to address both safe sex and alcohol use, illustrating how drinking impacts sexual risk.

To test this new model, the researchers recruited 560 Black women—18 to 24 years old—from community settings in Atlanta, including malls, public transit stops, and outside of nightclubs. Participants enrolled in the study if they reported recent unprotected sex and recent alcohol use.

The study randomly assigned the women to one of three groups: Horizons, Horizons+, or the control group. The control group participated in a one-hour educational session on STI prevention with an informational video, a question-and-answer session, and group discussion.

The Horizons group met on two consecutive Saturdays for five-hour workshops on STI prevention. The Horizons+ group completed the same workshops, plus a one-hour session addressing risky alcohol use. The added session used group motivational enhancement therapy, a type of group therapy based on principles of motivational psychology that takes an active rather than passive learning approach to produce rapid,



internally motivated change. Motivational enhancement therapy has been shown to be successful at changing substance use behaviors.

The group therapy aimed to increase participants' awareness of the consequences of alcohol use and its effects on decision-making, presented strategies to reduce alcohol-related sexual risk behavior, and aimed to help women effectively communicate their intentions to use condoms or abstain from sex, especially when using alcohol. Using role play, participants rehearsed how to have these tricky conversations with sexual partners and practiced how to safely resist or leave situations involving risky drinking.

Following the weekend workshops, Horizons and Horizons+ participants received follow-up phone calls and text messages to reinforce the content that they learned. The researchers then measured several outcomes: safe sex, STIs, and problematic alcohol use, including binge drinking.

Both interventions significantly reduced <u>alcohol use</u>: Horizons+ reduced the odds of weekly <u>binge drinking</u> by 59 percent and Horizons by 48 percent.

Participants in Horizons+ had 45 percent greater odds of <u>safe sex</u> than did the control group; Horizons alone did not differ from the <u>control group</u>. The interventions did not reduce incidence of STIs, likely because rates were low to begin with in the study population, unlike previous studies of Horizons where participants were recruited from STI clinics.

"The expanded intervention focusing on risky drinking creates a framework for addressing challenges and problem-solving within sexual partnerships; our findings suggest that using a combined approach of sexual health promotion and <u>alcohol</u> reduction, which reinforce each



other, can significantly reduce both risky sex and drinking," said DiClemente.

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