Increasing safer sex behaviors and voluntary HIV testing among Latina mothers and teen daughters:
Pilot findings from Hablando Claro family-based HIV prevention intervention

Britt Rios-Ellis, PhD · Lilia Espinoza, MPH, PhD · Melawhy Garcia-Vega, MPH · Natalia Gatdula, BS



Presenter Disclosures

Lilia Espinoza, MPH, PhD

(1) The following personal financial relationships with commercial interests relevant to this presentation existed during the past 12 months:

"No relationships to disclose"

Why focus on Latinas?

- □ Increasing epidemic among women and Latinas
 - Latinas comprise 11% of the U.S. female population, yet account for 14% of estimated HIV diagnoses (2009)
 - HIV v. AIDS surveillance data
- □ In 2006, HIV infection rate for Latinas was 4 times the rate for White women
- □ Women are more likely to be infected through heterosexual contact (83%)
- □ More than 6 in 10 new HIV infections occur among women ages 13-39

Source: CDC (2011

Latinos in Los Angeles County

- In Los Angeles County, many Latinos first learn of their HIV serostatus when given an AIDS diagnosis¹
- 67% of Latinos had less than 1 year between learning of their HIV and receiving an AIDS diagnosis²
- Latinos represent the majority of early detection failures
 - 35% of Latinos had less than 1 month before receiving their AIDS case diagnosis²

¹Centers for Disease Control and Prevention, 200 ²Los Angeles County Department of Public Health HIV Epidemiology Program, 200

Latina HIV Risk Factors

- □ Male partners
 - Latinas and heterosexual transmission
 - Male infidelity
 - **□** Female power imbalances
 - Low-risk sexual behaviors (Hirsch et al., 2002; Rice et al., 2009)
 - Perception of HIV risk
 - Control of and negotiation for safer sex

HIV Risk Factors

□ Interpersonal and sociocultural factors

- Less parent-child communication on sexual behavior (Guzman et al, 2003)
- Acculturation (Shedlin et al, 2005)
- Stigma around HIV and testing (Diaz & Ayala, 2001)
- $\hfill \Box$ Socioeconomic factors (Shedlin *et al*, 2005; LA HIV Commission, 2007)
 - □ Immigration, poverty, lower educational levels, limited health insurance ⇒ lower access to culturally and linguistically relevant HIV services and information

Hablando Claro: Project Goal

To reduce the risk of HIV infection among <u>Latina</u> teens, aged 12-18 years, and their female family members by creating and strengthening a multigenerational HIV/AIDS prevention intervention, with particular focus on families with <u>female</u> immigrants who are more likely to lack access to culturally and linguistically relevant HIV/AIDS education and prevention.

Hablando Claro: Objectives

- □ Significant increases in:
 - □ intention to use condoms
 - □ intention to delay sexual onset or re-initiation
 - □ knowledge related to HIV risk-reduction
 - □ intention to perform HIV risk-reduction behaviors
 - self-reported sex communication between Latina intergenerational family dyads
 - $\ \square$ the number of persons who are tested for HIV

Pilot sample

- □ Baseline: 396 Latina women
 - □ 170 adults, 226 youth
- □ Follow-up: 344 Latina women
 - □ 148 adults, 196 youth
- □ Charlas: February August 2010
 - □ Two pilot phases
 - □ Instruments: demographics, pretest, immediate
- □ 3-month follow-up: June December 2010

Measures (I)

- □ Demographics
- □ Linguistic acculturation (Marín et al.)
 - ■5 items, range: 1 (All Spanish) 5 (All
 - English)
 - \square Youth: α = 0.65, adults: α = 0.77
- □ HIV knowledge
 - ■9 items, True/False
- ☐ Behaviors: HIV testing, sexual

Measures (II)

- □ Sexual communication Pilot 2 data only:
 - Adults only: skills to initiate discussion with daughter (1 item)
 - By generation:
 - Frequency in communication with parent/youth
 - 4-point scale: 1 (Never) 4 (Often)
 - Comfort in communication with parent/youth
 - 5-point scale: 1 (Very Uncomfortable) 5 (Very Comfortable)
 - Topics: sex, STD's, HIV/AIDS, pregnancy, using condoms

Resu	lte

Demographics (I)

	Youth (n = 196)*	Adults (n = 148)*
Age, mean years (SD)	14.2 (1.8)	41.5 (6.9)
Education (n)		
Middle school	53.6% (105)	64.4% (94)
High school	43.9% (86)	21.9% (32)
College	2.6% (5)	11% (16)
Foreign-born	18.7% (36)	98.6% (145)
Median years in U.S. (Q1, Q3)	8 (0.5, 10.6)	14.4 (0.75, 19)
Some missing in each group		

Demographics (II)

	Youth (n = 196)*	Adults (n = 148)*
Primary language		
Spanish	66% (128)	98.6% (146)
English	32% (62)	1.4% (2)
Both equally	2.1% (4)	0
Mean acculturation score	3.2 (0.6)	1.5 (0.5)
Uninsured	15.3% (27)	41.1% (60)

Demographics (III)

	Youth (n = 196)*	Adults (n = 148)*
Relationship status		
Single	82.4% (159)	14.2% (21)
Married/in a relationship	17.6% (34)	85.1% (126)
Heterosexual	91.5% (173)	100% (143)

Some missing in each group

HIV Knowledge

	Youth (n = 173)	Adults (n = 114)
Baseline	5.29	4.85
Follow-up	6.53	6.60

- $\hfill\Box$ HIV knowledge:
 - 9 items, True/False
- $\hfill \square$ Statistically significant increases in HIV knowledge:
 - Youth = 1.24-point increase (t = -8.28, p < .0001)
 - Adults = 1.75-point increase (t = -11.26, p < .0001)

Oral Sex

	Youth (n = 196)*	Adults (n = 148)*
Baseline		
Ever had oral sex	11.5% (22)	50.7% (72)
Oral sex, past 3 months	4.8% (9)	21.8% (31)
Consistent condom use, past 3 months	33.3% (3)	10.3% (3)
Follow-up		
Oral sex, past 3 months	5.1% (10)	18.9% (28)
Consistent condom use, past 3 months	20% (2)	10.7% (3)

Vaginal Sex

	Youth (n = 196)*	Adults (n = 148)*
Baseline		
Ever had vaginal sex	8.7% (17)	82.7% (124)
Vaginal sex, past 3 months	4.6% (9)	69.3% (104)
Consistent condom use, past 3 months	55.6% (5)	16.3% (16)
Follow-up		
Vaginal sex, past 3 months	8.7% (17)	82.7% (124)
Consistent condom use, past 3 months	47.1% (8)	21.1 (26)

Anal Sex

	Youth (n = 196)*	Adults (n = 148)*
Baseline		
Ever had anal sex	2.7% (5)	19.1% (27)
Anal sex, past 3 months	0	2.7% (5)
Consistent condom use, past 3 months		75% (3)
Follow-up		
Anal sex, past 3 months	<1% (1)	3.3% (5)
Consistent condom use, past 3 months	100% (1)	20% (1)

*Some missing in each group

Number of Sexual Partners

Youth (n = 196)* Adults (n = 148)* Baseline 1 (1, 1) 1 (1, 1) Median number, past 3 months Follow-up Median number, lifetime 1 (1, 3) 1 (1, 2) 1 (1, 1) 1 (1, 1) Median number. past 3 months

*Some missing in each group

Sexual Communication

	Baseline	Follow-up	Paired t-test
Youth (n=136)			
Frequency	1.96	2.30	t = -4.92, p < .0001
Comfort	2.80	3.21	t = -3.67, p = .0004
Adults (n=101)			
Frequency	2.95	3.24	t = -3.21, p = .002
Comfort	3.59	4.06	t = -3.56, p = .0006

HIV Testing Behaviors

	Youth (n = 196)*	Adults (n = 148)*
Ever tested for HIV (baseline)	8.3% (13)	76.4% (113)
Tested since charla (follow-up)	9.6% (15)	64.9% (96)

- □ No significant differences between baseline and follow-up
- Most youth (73%; n=11) and adults (86%; n=83) who reported recent HIV testing at follow-up were tested at the charla
- □ Since the charlas:
 - Newly tested: 11 youth, 22 adults
 - Most new testers had their first HIV test at the charla
 Youth (80%; n=8), Adults (91%; n=20)

Discussion

Conclusions

- □ Importance of incorporating an HIV knowledge piece
- $\hfill\Box$ One 3-month follow-up assessment may not be sufficient to detect any sexual behavior changes
- □ Free mobile HIV testing at charla presented an opportunity to test, especially for new testers
- □ Increased frequency and comfort with talking about sex-related topics

Lessons Learned

- □ Include more opportunities for role plays so dyads can practice positive forms of communication
- □ Initiate family-based activities with men and boys to fully address female risk
 ■ Hold equal expectations for males and females

Thank You!

For more information:
Melawhy Garcia-Vega, MPH
mgarcia13@csulb.edu



Lilia Espinoza, MPH, PhD

<u>lespinoz@usc.edu</u>