

AMIGAS

(Amigas, Mujeres Latinas, Informándonos, Guiándonos, Y Apoyándonos Contra El Sida)
(Friends, Latina women, informing, guiding and supporting each other against AIDS)

Best Evidence – Risk Reduction

INTERVENTION DESCRIPTION

Target Population

- Latina women

Goals of Intervention

- Reduce HIV risk behaviors

Brief Description

AMIGAS is a group-level culturally congruent HIV sexual risk reduction intervention. The intervention includes four sessions delivered to groups of 7-8 women. The group sessions are delivered in Spanish by Latina health educators. The first session emphasizes ethnic, cultural, and gender pride. This session explores the unique strengths, diversity, and beauty of Latina women through acknowledging their accomplishments and reflecting on the richness of Latin cultural norms and values including the importance of family and religious beliefs. Session two emphasizes the importance of healthy relationships. The health educators describe how unhealthy relationships can create barriers to practicing safer sex. This session also addresses reproduction, the female anatomy, and the value of one's body. The third session uses video testimonials by Latina women living with HIV to enhance awareness of HIV risk practices and dispel common myths about HIV in the Latina community. The health educators discuss HIV risk reduction strategies including abstinence, consistent condom use, and fewer male sexual partners. The last session explores how experiences such as immigration, deportation, and acculturation can affect HIV risk among Latina women. The participants engage in role-playing activities that integrate culturally appropriate themes to enhance women's confidence in initiating safer sex conversations, negotiating safer sex, and refusing unsafe sexual encounters.

Theoretical Basis

- Social Cognitive Theory
- Theory of Gender and Power

Intervention Duration

- Four weekly 2.5-hour sessions delivered over one month

Intervention Setting

- County HIV/AIDS office

Deliverer

- Trained Latina health educators

Delivery Methods

- Discussion
- Exercise
- Role play
- Video

INTERVENTION PACKAGE INFORMATION

An intervention package is not available at this time. Please contact **Gina M. Wingood**, Rollins School of Public Health, Department of Behavioral Sciences and Health Education, 1518 Clifton Road NE, GCR 548, Mailstop 1518-002-5AA, Atlanta, GA 30322.

Email: gwingoo@sph.emory.edu for details on intervention materials.

EVALUATION STUDY AND RESULTS

The original evaluation was conducted in Miami, Florida between 2007 and 2010.

Key Intervention Effects

- Increased consistent condom use
- Increased condom protected sex
- Increased condom use at last sex
- Reduced unprotected sex[†]
- Reduced never used condoms

Study Sample

The baseline study sample of 252 women is characterized by the following:

- *100% Hispanic/Latina*
- *100% female*
- *100% heterosexual*
- *Mean age of 30 years*
- *44% completed 12 or fewer years of education*

Recruitment Settings

Not reported

Eligibility Criteria

Women were eligible if they self-identified as Latina, were Spanish-speaking, between 18 to 35 years of age, reported unprotected vaginal sex[†] with a male sexual partner during the past 90 days, were unmarried and not living with a male sexual partner, and not pregnant or planning pregnancy.

Assignment Method

Women (N = 252) were randomly assigned to 1 of 2 study arms: AMIGAS HIV sexual risk reduction intervention (n = 125) or a general health promotion comparison (n = 127).

Comparison Group

The general health intervention comparison consisted of a single 2.5-hour interactive group session with an average of 7 to 8 women. A trained Latina health educator delivered the session in Spanish. The session included a video that provided basic HIV information in Spanish.

Relevant Outcomes Measured and Follow-up Time

- Sex behaviors (including consistent condom use, never used condoms, and number of unprotected vaginal sex acts[†] during last 30 days and 90 days, the proportion of condom-protected vaginal intercourse acts [on average] and condom use at last vaginal intercourse) were measured at 3 and 6 months post-intervention.

Participant Retention

- AMIGAS HIV sexual risk reduction intervention
 - 82% retained at 3 months
 - 87% retained at 6 months
- General health intervention comparison
 - 79% retained at 3 months
 - 91% retained at 6 months

Significant Findings

- Across 3 and 6 months combined, intervention participants were significantly more likely than comparison participants to report consistent condom use in the past 30 days (Adj OR = 3.14, $p < 0.001$) and in the past 90 days (Adj OR = 4.81, $p < 0.001$). Significant intervention effects were also found for consistent condom use at the 3 month follow-up for the past 30 days (Adj OR = 3.13, $p = 0.003$) and past 90 days (Adj OR = 5.59, $p < 0.001$), and at the 6 month follow-up for the past 30 days (Adj OR = 3.36, $p < 0.001$) and past 90 days (Adj OR = 4.87, $p < 0.001$).
- Across 3 and 6 months combined, intervention participants reported a significantly higher mean percentage of condom use during the past 30 days (% relative difference = 43.75, $p < 0.001$) and during the past 90 days (% relative difference = 55.72, $p < 0.001$). Significant intervention effects were also found at the 3 month follow-up for the past 30 days (adjusted mean 57.49% vs. 40.08%, % relative change = 43.44, $p = 0.009$) and past 90 days (Adjusted 59.50% vs. 33.23%, % relative difference = 79.06, $p < 0.001$) and at the 6 month follow-up for the past 30 days (adjusted mean 56.16% vs. 40.15%, % relative change = 39.87, $p = 0.009$) and for the past 90 days (Adjusted mean 55.88% vs. 38.58%, % relative difference = 44.84, $p = 0.003$).
- Across 3 and 6 months combined, intervention participants were significantly more likely than comparison participants to report condom use at last sex (Adj OR = 2.76, $p < 0.001$). Significant intervention effects were also found for condom use at last sex at the 3 month (Adj OR = 3.54, $p < 0.001$) and the 6 month follow-ups (Adj OR = 1.96, $p = 0.02$).
- Across 3 and 6 months combined, intervention participants were significantly less likely than comparison participants to report never having used condoms in the past 30 days (Adj OR = 0.52, $p = 0.02$) and in the past 90 days (Adj OR = 0.47, $p = 0.007$). Significant intervention effects were also found for never having used condoms at the 3 month follow-up for the past 90 days (Adj OR = 0.33, $p = 0.005$), and at the 6 month follow-up for the past 30 days (Adj OR = 0.48, $p = 0.03$).
- Intervention participants reported a significantly lower mean percentage of unprotected vaginal sex acts[†] during the past 90 days than comparison participants across 3 and 6 months combined (% relative difference = -33.98, $p = 0.007$), and at the 3 month follow-up (Adjusted mean 10.59% vs. 17.39%, % relative difference = -39.10, $p = 0.008$).

Considerations

- Across 3 and 6 months combined, intervention participants reported significantly greater HIV knowledge scores than comparison participants (% relative difference = 3.25, $p = 0.009$); greater self-efficacy for using condoms than comparison participants (% relative difference = 10.39, $p < 0.001$)*; greater self-efficacy for negotiating safe sex than comparison participants (% relative difference = 10.12, $p < 0.001$); and greater perception of power in their relationships than comparison participants (% relative difference = 4.12, $p = 0.02$).
- At the 3 month follow-up, significant intervention effects were found for greater HIV knowledge scores (% relative difference = 3.56, $p = 0.02$), greater self-efficacy for using condoms (% relative difference = 11.37, $p < 0.001$)*, and greater self-efficacy for negotiating safe sex (% relative difference = 9.97, $p < 0.001$). At the 6 month follow-up, significant intervention effects were found for greater self-efficacy for using condoms (% relative difference = 9.05, $p < 0.001$)* and greater self-efficacy for negotiating safe sex (% relative difference = 10.09, $p < 0.001$).
- Across 3 and 6 months combined, intervention participants reported fewer perceived barriers to using condoms than comparison participants (% relative difference = 8.12, $p < 0.001$)* and reported fewer traditional gender roles than comparison participants (% relative difference = 4.41, $p = 0.008$).
- At the 3 month follow-up, significant intervention effects were found for fewer perceived barriers to using condoms (% relative difference = 7.32, $p = 0.003$)* and reporting fewer traditional gender roles (% relative difference = 5.17, $p = 0.01$). At 6 month follow-up, significant intervention effects were found for fewer perceived barriers to using condoms (% relative difference = 8.98, $p < 0.001$)*.
- Missing data was >10% at the 3 month follow-up for three outcomes (consistent condom use past 90 days, never used condoms past 90 days, and % condom use past 30); however, attrition plus missing data did not exceed 40% (34.9%), which is considered acceptable.*
- Missing data was >10% at the 6 month follow-up for three outcomes (consistent condom use past 30 days, never used condoms past 30 days, and % condom use past 30 days); however, attrition plus missing data did not exceed 40% (25.8%), which is considered acceptable.*
- Overall attrition was associated with baseline consistent condom use in the past 30 days ($p = 0.049$) where participants who reported consistent condom use were more likely to be lost to follow up.
- Attrition was associated with being born in the U.S. in the intervention group ($p = 0.04$), with a larger portion of intervention participants retained in the study being foreign born.

*Information obtained from author

†Unprotected sex measured as sex without a condom

REFERENCES AND CONTACT INFORMATION

Wingood, G. M., DiClemente, R. J., Villamizar, K., Er, D., DeVarona, M., Taveras, J., . . . Jean, R. (2011). [Efficacy of a health educator delivered HIV prevention intervention for Latina women: A randomized controlled trial](#). *American Journal of Public Health, 101*, 2245-2252.

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