

SELF-HELP IN ELIMINATING LIFE-THREATENING DISEASES (SHIELD)

Best Evidence – Risk Reduction

INTERVENTION DESCRIPTION

Target Population

- Low-income African American drug users

Goals of Intervention

- To reduce drug and sex risk behaviors

Brief Description

SHIELD is a small-group, interactive intervention that relies on peer networks to reduce drug and sex risk behaviors. Participants are asked to make public commitments to increase their own health behaviors and to promote HIV prevention among their networks and community contacts. The intervention includes multiple training and skill building sessions that involve setting goals, role plays, demonstrations, and group discussions. In addition, one session occurred in the community and provided a “street outreach” practice session. These sessions teach participants techniques for personal risk reduction and the development of correct condom use and safer sex negotiation skills. The intervention also addresses injection drug use risk and the avoidance of risky situations. To present HIV risk within a broader community context, the intervention emphasizes the interrelatedness of HIV risk among individuals, their risk partners, and their community. Participants are also provided tools and strategies for effective community outreach, and are encouraged to conduct HIV education and become advocates of risk reduction among their sex and drug partners, family and friends, and other community members.

Theoretical Basis

- Active Learning Theory
- Cognitive Consistency Theory
- Social Identity Theory
- Social Influence Theory
- Social Cognitive Theory

Intervention Duration

- Ten 90-minute sessions

Intervention Setting

- The setting for the 10-session training is a community-based research clinic; but the participant-delivered outreach is conducted throughout the community.

Deliverer

- Male and female indigenous paraprofessional facilitators

Delivery Methods

- Community mobilization
- Demonstrations
- Exercises
- Goal setting
- Group discussions
- Outreach
- Printed materials
- Role plays and practice
- Supplies

INTERVENTION PACKAGE INFORMATION

In August 2013, the Centers for Disease Control and Prevention's Division of HIV/AIDS Prevention (DHAP) **announced** that in accordance with its High Impact Prevention approach, DHAP will focus its behavioral intervention portfolio on interventions that are cost-effective, scalable and prioritize prevention for persons living with HIV and those persons at highest risk for acquiring HIV. **SHIELD will no longer be funded by DHAP** for diffusion, adoption, and implementation.

For additional information on this intervention, please contact **Carl Latkin**.

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EVALUATION STUDY AND RESULTS

The original evaluation study was conducted in Baltimore, Maryland between 1997 and 1999.

Key Intervention Effects

- Reduced needle sharing
- Reduced injection drug use frequency
- Increased cessation of injection drug use
- Increased condom use with casual partners

Study Sample

The baseline study sample of 250 drug-using men and women is characterized by the following:

- *94% black or African American, 6% unspecified*
- *61% male, 39% female*
- *Mean and median age of 39 years*

Recruitment Settings

Recruitment of participants in high risk areas identified through observations, focus groups, and geographical coding of drug-related arrests in Baltimore City.

Eligibility Criteria

Eligible participants had to be at least 18 years or older, had at least weekly contact with drug users, were willing to conduct AIDS outreach education and bring in 2 network members for assessment, and not enrolled in a recent behavioral HIV prevention or network study.

Assignment Method

Participants were randomly assigned in a ratio of 2:1 to the intervention (n = 172) or control (n = 78) groups.

Comparison Group

The control group was designed to be equivalent to the intervention group in number of sessions (10), duration (90 minutes each), and interest level. The control intervention involved basic HIV prevention education focusing on the prevention of HIV transmission through needle sharing and unprotected sex. Intervention sessions also included videotapes of the Public Broadcasting System series *Focus on the Family*. The program focused on addiction and family psychodynamics, and group discussions were delivered by indigenous peer paraprofessional facilitators.

Relevant Outcomes Measured and Follow-up Time

- Injection drug outcomes during the previous 6 months (including frequency of injection drug use and needle sharing) were assessed at the 6-month post-intervention follow-up
- Sexual risk behaviors during the previous 6 months (including frequency of condom use with main and casual sex partners, number of casual partners) were assessed at the 6-month follow-up

Participant Retention

- SHIELD Intervention
 - 91% retained at 6 months
- Control Intervention
 - 94% retained at 6 months

Significant Findings

- At 6-month follow-up, injection drug users receiving the SHIELD intervention reported significantly greater reductions in needle sharing ($p < 0.05$) and injection drug use frequency ($p < 0.05$) and were more likely to stop injecting drugs ($p < 0.05$) than those in the control group.
- Among sexually active drug users, those receiving the SHIELD intervention reported significantly greater increases in condom use with casual sex partners ($p < 0.05$) than those in the control group.

Considerations

- The participation rate in the evaluation was low because 59% of participants who completed the baseline assessment did not bring in network members, and an additional 13% did not return for the intervention.

REFERENCES AND CONTACT INFORMATION

Latkin, C. A., Sherman, S., & Knowlton, A. (2003). [HIV prevention among drug users: Outcome of a network-oriented peer outreach intervention](#). *Health Psychology, 22*, 332–339.

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