FEMALE CONDOM SKILLS TRAINING (FEMIT)
Best Evidence – Risk Reduction

INTERVENTION DESCRIPTION

Target Population
- HIV-negative heterosexual women attending family planning clinics

Goals of Intervention
- Increase use of female condoms
- Increase protected sex

Brief Description
The Female Condom Skills Training (FEMIT) is a 4-session intervention designed to increase knowledge about safer sexual practices, condom use skills, and ability to negotiate condom use. The first 2 sessions (2 hours each) are delivered to individual participants by a health educator and focus on safer sex education, male and female condom use, and communication skills building. These 2 sessions include demonstration and practice of male and female condom use, address personal barriers to female condom use, and introduce and practice effective communication skills for talking to male partners about female condoms. The third session is conducted in small groups of 6-10 women and facilitated by 2 health educators. This 2.5-hour group discussion focuses on barriers to and eroticization of female condom use and negotiation skills building. The last session is a 30-minute telephone follow-up with each individual participant to review personal goals made during previous sessions, and to identify and address any additional barriers to female condom use. Participants also receive male and female condom supplies based on the reported amount of sexual activity.

Theoretical Basis
- Social Learning Theory

Intervention Duration
- Four sessions delivered over 6 weeks, including 2 individual and 1 group session ranging from 2 to 2.5 hours and a 30-minute telephone follow-up session

Intervention Setting
- Family planning clinics

Deliverer
- Health educators

Delivery Methods
- Demonstration
- Discussion
- Exercises
- Goal setting
- Interactive activities
- Lecture
- Practice
- Risk reduction supplies
- Role play
- Video
INTERVENTION PACKAGE INFORMATION

An intervention package is not available at this time. Please contact Kyung-Hee Choi, UCSF Center for AIDS Prevention Studies, 50 Beale Street, 13th floor, San Francisco, CA 94105.

Email: kyung-hee.choi@ucsf.edu for details on intervention materials.

EVALUATION STUDY AND RESULTS

The original evaluation was conducted in four San Francisco Bay Area cities (Concord, Mountain View, Santa Cruz, and San Francisco) in California between 2003 and 2005.

Key Intervention Effects
- Increased female condom use
- Increased any condom use

Study Sample
The baseline study sample of 409 women is characterized by the following:
- 64% white, 17% Hispanic/Latina, 11% black or African American, 8% Asian
- 100% female
- Mean age of 22 years, range: 18-39 years
- 42% completed high school and 16% completed at least some college

Recruitment Settings
Family planning clinics

Eligibility Criteria
Women were eligible if they self-identified as African American, Asian, Latina or white, were English-speakers, between 18 and 39 years of age, had 2 or more male sexual partners in the prior year, had no known allergies to polyurethane, latex or lubricants, were HIV-negative, had no plans to get pregnant within the next 6 months, and attended the first scheduled intervention session.

Assignment Method
Women (N = 409) were assigned using block randomization, stratified by race/ethnicity, to 1 of 2 groups: FEMIT intervention (n = 213) or Women’s General Health Promotion comparison (n = 196).

Comparison Group
The Women’s General Health Promotion comparison was designed to increase knowledge about behaviors associated with major health problems (e.g., cancer and heart disease) and to improve motivation to change health risk behaviors. The format and length (4 sessions over 6 weeks delivered by health educators individually and in groups) were identical to those of the FEMIT intervention and included a demonstration of female condom use. Participants also received male and female condom supplies based on the reported amount of sexual activity.
Relevant Outcomes Measured and Follow-up Time
- Sex behaviors (including using a female or male condom at least once for anal or vaginal intercourse, and anal or vaginal intercourse protected by female condoms, by male condoms, or by any condom during the past 3 months) were measured at 3 and 6 months post-intervention.

Participant Retention
- FEMIT intervention
  - 83% retained at 3 months
  - 83% retained at 6 months

- Women’s General Health Promotion Comparison
  - 87% retained at 3 months
  - 88% retained at 6 months

Significant Findings
- Intervention participants were significantly more likely to report female condom use at least once at the 3-month follow-up (p < .001) and at the 6-month follow-up (p < .001) than comparison participants.
- At the 6-month follow-up, intervention participants reported a significantly higher proportion of vaginal or anal intercourse acts protected by any male or female condom than the comparison group (p = .028).
- Across the 2 follow-up time points, intervention participants reported a significantly higher proportion of vaginal or anal intercourse acts protected by a female condom (p = .04) and by any male or female condom (p = .032) than comparison participants.

Considerations
- None

REFERENCES AND CONTACT INFORMATION


Researcher: Kyung-Hee Choi, PhD
UCSF School of Medicine
550 16th Street
San Francisco, CA 94108
Email: kyung-hee.choi@ucsf.edu