**Introduction**

**Background**
- HIV/AIDS
  - Threat to lives, health & well-being of individuals worldwide.
  - Leading cause of death globally among women of reproductive age.
  - Primary mode of infection in women: heterosexual transmission
  - Adolescent young women particularly vulnerable – age & gender power differentials
  - No cure & no vaccine
  - Need to rely on behavioral interventions to prevent HIV infection

**Motivational interviewing (MI) & behavioral skills building (BSB)** proven to be efficacious
- MI & BSB - modes of intervention flexible enough to address cultural and developmental differences

**Purpose:** To pilot a behavioral HIV prevention intervention to reduce heterosexually transmitted HIV in a culturally diverse sample inclusive of Black, Hispanic & White adolescent young women ages 15-19 years.

**Aims:**
1. Determine feasibility of HIV prevention intervention that consists of MI & BSB techniques in a primary care setting
2. Establish fidelity of intervention
3. Determine training needs of health care providers who deliver intervention
4. Enhance nursing students’ research experience

**Methods**

**Sites**
- Urban community health center
- University-based adolescent primary care site

**Sample:** Culturally diverse sample of adolescent young women ages 15-19 years

**Measures**
1. Measures of feasibility of MI/BSB intervention
   - Length of time for participants to complete demographic & sexual practices survey
   - Length of time to implement MI/BSB intervention
   - Period of time for participant enrollment
   - Integration of intervention into a primary care setting
2. Measures of fidelity of MI/BSB intervention
   - Motivational Interviewing/ Treatment Integrity (MITI) Coding Instrument & the Behaviour Change Counseling Index (BECCI)
3. Measure of training needs
   - Determined by length of time for trainees to achieve fidelity in intervention delivery
4. Measures of enhancement of nursing students’ research experience
   - Students’ self-report of experience as research assistants
   - Faculty member/principal investigator’s (PI) observations of students’ experiences

**Procedures**
- 3 graduate nursing students hired as research assistants (RAs); trained in MI & BSB methods
- Training sessions: Seven sessions, 3 hours in length
- Interactive training sessions with RAs – didactic information, discussion & clinical simulation
- Topics - HIV/STIs, MI & BSB
- Fidelity testing of MI/BSB intervention with RAs
- Intervention piloted by PI at two primary care sites
- Inclusion criteria: female between 15-19 years, ability to read & speak English, well at time of visit, not pregnant
- Waiver of written & parental consent
- Survey & intervention completed after office visit
- Thank you gift for participation - $20 gift card

**Results**

1. **Feasibility of Motivational Interviewing/Behavioral Skills Building HIV prevention intervention**

   **Table: Time Measurement**
   **Site A: Community Health Center Teen Clinic**
   **Site B: University-Based Adolescent Primary Care**

<table>
<thead>
<tr>
<th>Length of Time</th>
<th>Sample</th>
<th>Site A</th>
<th>Site B</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mean # of minutes to complete consent</td>
<td>3.2</td>
<td>4.4</td>
<td>2.4</td>
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<tr>
<td>Range of minutes to complete consent</td>
<td>2-6</td>
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</tr>
<tr>
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<tr>
<td>Means # of minutes for intervention</td>
<td>13.8</td>
<td>14.6</td>
<td>13.4</td>
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<tr>
<td>Range of minutes to complete intervention</td>
<td>10-20</td>
<td>10-20</td>
<td>10-17</td>
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Acceptability of survey & intervention
- Surveys completed with no systematic missing data
- No objections expressed about questions or content of survey or intervention
- Survey & intervention data consistent

Participant enrollment:
- 2 participants recruited per 4-hour clinic session
- 93% of those invited participated in study
- After enrolling, 100% completed study.

Integration of intervention into primary care setting
- No disruption in clinic schedule
- No disruption of physical resource utilization

2. **Fidelity of intervention**

   - Use of MITI & BECCA both instructive & evaluative of motivation interviewing & behavioral skills building techniques
   - 15 hours of training to attain fidelity in MI/BSB intervention delivery

3. **Training needs:**
   - Determined by iterative process of fidelity testing that guided training session content

4. **Research experience for nursing students:**
   - Students self-report: Increased understanding & interest in research process, opportunity to be part of a research team, knowledge & skill development in topics & methods relevant to clinical practice
   - Faculty/PI observations: active engagement in research process, development of teamwork skills, enjoyment of experience

**Discussion**

- Discussion of findings
  - 15-minute intervention consistent with brief office visit
  - Survey & intervention acceptable to sample
  - Survey & intervention not disruptive to practice sites
  - Intensive MI/BSB training needed to achieve intervention fidelity
  - Nursing students found RA experience enriching & gratifying.

**Limitations**
- Small sample, cross sectional design
- Implications for future research
- Development of larger, longitudinal investigations
- Outcomes of MI/BSB intervention on HIV risk reduction behaviors

**Conclusions**

- Nursing students can be incorporated effectively into the research team with clear benefits for both students & faculty.
- Preliminary data suggest that a one-on-one HIV prevention intervention is feasible in a primary care office setting.

**Acknowledgements**
- UVM College of Nursing and Health Science Research Start-Up Fund
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**Contact**

Ellen Long-Middleton
Email: ellen.long-middleton@uvm.edu
Phone: 001-802-656-3304
Website: www.uvm.edu

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**Pilot HIV Prevention Study for Adolescent Young Women**

Ellen Long-Middleton, PhD, RN, Family Nurse Practitioner

The University of Vermont • College of Nursing and Health Sciences

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**Our Future**