



# Pilot HIV Prevention Study for Adolescent Young Women

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## 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
  - Wavier 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*

Length of Time	Sample N=13	Site A n=5	Site B n=8
Mean # of minutes to obtain consent	3.2	4.4	2.4
Range of minutes to obtain consent	2-6	3-6	2-4
Mean # of minutes to complete survey	4.5	4.6	4.5
Range of minutes to complete survey	3-6	3-5	4-6
Means # of minutes for intervention	13.8	14.6	13.4
Range of minutes to complete intervention	10-20	10-20	10-17

### 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.

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