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Implementing a Community-Based Intervention for African American Mothers and Daughters

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Summary

Adolescents represent one of the fastest growing risk groups for HIV¹. Inner-city, minority youth are at highest risk because of concentration of HIV in inner-city areas, higher rates of STDs, and early sexual initiation². Mothers are the primary sex educator³ of daughters, and girls state their relationship with their mother was an important influence on their delaying sexual activity⁴. With 70% of adolescent HIV seroconversions occurring among African American (AA) females², studies are urgently needed to enhance mother-daughter sexual communication. The purpose of this poster is to offer insights on the logistics of carrying out a manualized program.

Goals and Objectives

Early adolescence is a neglected area for HIV prevention. In a review of HIV prevention interventions for adolescent girls there was no AA-specific study with mean ages less than 15 years⁵. The aims of this pilot are to demonstrate the feasibility of recruiting and retaining the dyads over the course of the study, as well as to evaluate the developmental appropriateness & acceptability of the intervention for early adolescent girls and their mothers.

The intervention (Life Understanding Mothers Bonding with Adolescents, LUMBA) focuses on the AA mother-daughter dyad, is specific to the developmental age of the girls, and is designed to enhance sexual communication and decrease heterosocial risky behaviors. Further funding will be sought for a full intervention testing. The purpose of this report is to provide clinicians and researchers with suggestions and practical advice for carrying out clinical research or educational projects in the community.

Results

Protocols - Adolescent participation in health-related research studies is important to facilitate policy and program development and to design appropriate prevention and developmental strategies for this age group. One of the delays with starting this project was secondary to the need for specificity regarding the legal issues surrounding the rights of the girls and the fact that the project focuses on sexual health.

Logistic Arrangements - Respecting and abiding by protocol in a community setting is of utmost importance when carrying out a pilot project. When the study was in the planning stages the Clinical Director and the PI meet to discuss where the recruiters would be able to be positioned to meet families, as well as the available space for the intervention. Several operational changes occurred at the community partner while waiting for IRB approval. Flexibility is key; we adjusted our plan in regard to recruitment, time, and space.

Recruitment Issues - Both mother and daughter needed to be present in order to learn about the study in detail through the consent process. Many times mother was at the clinic with another child without the daughter. In several occasions the dyad were not available the next Saturday for the project, which meant several phone contacts to keep in touch and give reminders of when the project was taking place. The phone contacts were effective in the majority of the cases but a couple dyads were lost due to the delay.. Initially it was unclear if the staff was aware of the project. Although after a couple of recruitment sessions, the staff actually aided in recruiting dyads.

Methods

The lessons we learned include practical issues that emerged during research team discussions. These lessons include issues related to IRB approval, understanding the protocols at the community health center and advise on the logistics of carrying out the project or study.

Conclusion/Next Steps

This proposed pilot study provides evidence to the feasibility of recruiting and retaining mother-daughter dyads and acceptability of the intervention for the longitudinal randomized control trial (RCT). The RCT study will focus on the AA mother-daughter dyad, is specific to the developmental age of the girls, and is designed to enhance sexual communication and decrease heterosocial risky behaviors. Once efficacy is established, the effectiveness of LUMBA could be examined in a variety of environments such as community centers, churches, clinics and schools.

References and Resources

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Partnership Information

Student Involvement

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