

Efficacy of a Woman-Focused Intervention to Reduce HIV Risk and Increase Self-Sufficiency Among African American Crack Abusers

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African American women who use crack are especially at risk for HIV because many engage in high-risk behaviors and live in social contexts that increase their vulnerability. This study examines the effectiveness of a personalized, woman-focused HIV intervention tailored to gender and culture in reducing sex-risk behaviors, drug use, unemployment, and homelessness among out-of-treatment African American women who use crack.

The study sample comprised 620 out-of-drug-treatment African American women who use crack and were randomly assigned to one of three study conditions: (1) the woman-focused intervention, (2) a revised intervention modeled on the NIDA standard HIV intervention, and (3) a delayed treatment control group. The woman-focused and standard groups attended four intervention sessions. The woman-focused intervention included personalized feedback about risk that allowed participants to develop individualized behavior change plans that addressed not only drug use and risky sexual behavior but also general life circumstances. The standard intervention was similar in content but did not incorporate a context-specific empowerment approach. The delayed treatment control group received no intervention.

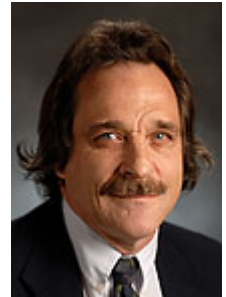
The study results are consistent with previous findings and demonstrate that some intervention appears better than no intervention and that a gender-specific and culturally tailored intervention may be more effective than a standard intervention at reducing sex risk over time, which historically has been difficult for HIV interventions to change. In addition, the findings suggest that empowerment-based interventions tailored to develop concrete solutions within personal social contexts, more than standard interventions, can influence other life changes and facilitate independence among African American women.

Overall, this study lends credence to the utility of tailoring interventions that target women with high-risk behaviors who live in multiple stressor environments. Helping women to empower themselves to reduce specific risk behaviors and raise their self-esteem may be one key to sustaining short-term and potentially longer-term risk reduction and healthy behaviors.

Link: <http://www.ajph.org/cgi/content/abstract/94/7/1165>



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