HIV sexual risk reduction interventions for women: a review
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Authors' objectives
To assess the effectiveness of interventions targeted specifically towards women in increasing condom use during sexual intercourse.

Searching
ERIC was searched from 1981 to May 1995, PsycLIT from 1984 to May 1995, and MEDLINE from 1981 to May 1995. The search strategies are provided.

Study selection
Study designs of evaluations included in the review
Five randomised controlled trials (RCTs), one non-randomised controlled trial and one before-and-after study were included.

Specific interventions included in the review
Non-theory-based interventions: these typically included single sessions communicating HIV preventive strategies through individual or group counselling or video presentations.

Theoretically-based interventions: these were based on psychological theories, and were typically multi-session programmes that included skills training and strategies to modify perceived peer or partner beliefs about risk-taking behaviour.

Participants included in the review
Women aged from 12 to 40 years, sampled in a range of settings. These included adolescent health, obstetric and primary care clinics, a methadone maintenance programme, a family health centre and an African-American community-based organisation. Studies were excluded if they sampled primarily commercial sex workers. The majority of women in the included in the review were ethnic minority women.

Outcomes assessed in the review
Primarily, reduction in sexual risk behaviours, knowledge, and condom use, though other outcomes are also reported in the appendices.

How were decisions on the relevance of primary studies made?
The papers were assessed for relevance by two independent authors.

Assessment of study quality
A set of methodological criteria was used to assess the primary studies. The criteria were: (1) clear description of study site and sample; (2) clear specification of aims; (3) specification of a theoretical framework; (4) description of programme implementation; (5) description of content and behaviour change techniques, sufficiently detailed to permit replication; (6) clear description of differences in treatment and control conditions for primary and secondary outcomes post-intervention; (7) inclusion of a randomly-assigned control or comparison condition; (8) specification of the length of follow-up; (9) specification of refusal rates reported for each study condition; (10) use of blinding; (11) reporting of retention rates for each study condition; (12) adherence to intention to treat principles in the data analysis; (13) assessment of pre-test equivalence on sociodemographic, behavioural and psychosocial factors between study conditions; (14) clear description of data analysis techniques; (15) specification of a measure of variability for the designated effect size; and (16) sample size justification. The papers were assessed for validity by two independent authors, and any disagreements were resolved by discussion.
Data extraction
The authors do not state how the data were extracted for the review, or how many of the authors performed the data extraction.

Methods of synthesis
How were the studies combined?
The studies were combined by a narrative review.

How were differences between studies investigated?
Differences between the studies are described in terms of methodology and whether or not the interventions were theory-based. In addition, the characteristics of the studies in which the intervention proved effective are compared with the characteristics of those in which the intervention was ineffective.

Results of the review
Five RCTs (697 participants), 1 non-randomised trial (214 participants), and 1 before-and-after trial (241 participants) were included.

All of the theoretically-based interventions (all investigated in RCTs) were effective in increasing condom use. The lengths of follow-up of these trials ranged from 3 to 12 months. All effective interventions emphasised gender-related influences on risk, were peer-led, and were multiple-session programmes.

Authors' conclusions
In general, behavioural interventions that were theory-driven, peer-led, addressed gender-relations and used multiple sessions were more effective at promoting the adoption of condom use.

CRD commentary
This is a good-quality review although there is one major shortcoming: the methodological flaws of trials are highlighted but this information is not fully utilised in summarising the results of the studies, and it is unclear whether the lower-quality studies are given less weight in drawing conclusions. The inclusion and criteria of the review should also be noted; they excluded studies of commercial sex workers and interventions targeted at reducing HIV-related injection drug behaviours, in order to ensure that the recommendations were applicable to the majority of women at risk of HIV infection. It should also be noted that non-US studies are excluded.

Bibliographic details

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This is a critical abstract of a systematic review that meets the criteria for inclusion on DARE. Each critical abstract contains a brief summary of the review methods, results and conclusions followed by a detailed critical assessment on the reliability of the review and the conclusions drawn.