

SISTER TO SISTER

Sister to Sister:

A Brief Skills-based HIV Risk-Reduction Program for Women in Primary Health Care Clinics

FACT SHEET

Program Overview

Sister to Sister is a brief (30-45 minute), one-on-one, skills-based HIV and sexually transmitted disease (STD) risk-reduction behavioral intervention that is delivered during the course of a routine medical visit by a female health care provider. The purpose of *Sister to Sister* is to:

- provide intensive, culturally sensitive health information to empower and educate women
- help women understand the various behaviors that put them at risk for HIV and other STDs
- enhance women's knowledge, beliefs, confidence and skills to help reduce their risk for STDs, especially HIV

The intervention is highly structured and implemented in a primary health care setting by nurses, health educators, or other professional clinic staff using a scripted teaching guide. It is educational, engaging, and gender-appropriate and uses videos, brainstorming, demonstrations, and skills-building activities. It is designed to be easily integrated into the health care provider's standard clinical practice. As such, *Sister to Sister* is an effective tool for addressing the needs of both patients and providers in primary health care settings.

Core Elements

Sister to Sister has two sets of core elements: content and implementation. Content core elements are the essential elements of what is being taught by the intervention that is believed to change risk behaviors. Implementation core elements are the essential characteristics of the intervention that relate to the logistics that result in a positive learning environment.

The *four content* core elements are:

1. Bolster three outcome expectancies regarding condom use (sexual pleasure, partner reaction, prevention).
2. Teach, demonstrate, and practice negotiation and refusal skills.
3. Condom use demonstration.
4. Build self-efficacy to empower the women to want to be safe sexually.

The *three implementation* core elements are:

1. Demonstrate a caring attitude.
2. Integrate and use the core intervention materials (*Provider Curriculum*, guides, videos, etc.).
3. Implemented by a female health care provider who provides clinical services to women and has completed the 8-hour required training.

Target Population

Originally designed for African American women, *Sister to Sister* is for high-risk sexually active women 18-45 years old who have male partners and are attending primary health care clinics.

Program Materials

- Implementation Manual
- Provider Curriculum
- Participant, PrEP, and PEP Guides
- Posters and video clips
- Condoms, lubricants and anatomical penile model
- CD of intervention materials for reproduction
- Evaluation Field Guide and Instruments

Research Results

Results of the *Sister to Sister* research indicated that compared with women in the control group, women in the skills-building interventions reported:

- Reduced HIV risk-associated sexual behavior
- Reduced frequency of sexual intercourse
- Reduced unprotected sexual intercourse
- Fewer sex partners
- Using condoms more often
- No effects on social desirability of condom use

These results were statistically significant at the 3-month and 12-month follow ups. Also, women in the skills-building interventions were less likely to test positive for an STD at the 12-month follow up than women in the control group.

More Information on *Sister to Sister*

For more information about *Sister to Sister* or to get your name on a list for future training, please visit our web site at <https://effectiveinterventions.cdc.gov>. You also may call us at (866) 532-9565 or e-mail us at intervention@danya.com.

Jemmott, J.B., & O'Leary, A. (2007). Effects on sexual risk behavior and STD rate of brief HIV/STD prevention interventions for African American women in primary settings. *American Journal of Public Health*, 97(6), 1-7.

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