Program Abstract

Summary

Globally more than 37 million people have been infected with the HIV virus. Sub-Saharan Africa remains the region most heavily affected by HIV, accounting for 67% of all young people living with HIV and 75% of AIDS deaths in 2007. In Uganda, adolescents are at increased risk of HIV infection compared to any other age group. Not only are young people still vulnerable to HIV infection in Uganda, but that risk may be increasing.

CyberSenga is part of an effort to increase technology-based HIV prevention research in resource-limited settings such as Uganda. The purpose of CyberSenga is to prevent more people from getting HIV and to help those who have HIV live healthy lives by taking advantage of Internet technology to give young people both honest and truthful information, and the tools they need to make good decisions. CyberSenga consists of five one-hour modules conducted through the online CyberSenga software, along with a four-month post-intervention booster session. At the beginning of the program, participants answer two questions to sort them into four groups: abstinent boys, abstinent girls, sexually active boys, andsexually active girls. Based on their responses, participants are directed to intervention content tailored for saliency based upon their biological sex and sexual experience, although all versions include the same concepts. Content discusses relevant topics to provide youth with the information and skills they need to make healthy decisions in the future.

An evaluation of CyberSenga has demonstrated that receiving the five CyberSenga sessions improves youths' HIV preventive information as well as motivation to use condoms, and the booster session delivered four months after the initial intervention enhances the learning effect.

Focus

☐ Primary pregnancy prevention   ☑ Secondary pregnancy prevention   ☑ STI & HIV/AIDS prevention

Original Site

☐ Home-based   ☑ Community-based   ☐ Clinic-based

Suitable for Use In   Although the original implementation of CyberSenga took place at deignated study café rooms at participants' schools, the program may be suitable for use in home- or clinic-based settings that work with adolescents.

Approach

☑ Abstinence
☑ Behavioral Skills Development
☐ Community Outreach
☑ Contraceptive Access
☑ Contraceptive Education
☐ Life Option Enhancement
☐ Motivational Interviewing
☑ Self-Efficacy/Self-Esteem
☑ Sexuality/HIV/AIDS/STI Education

Original Intervention Sample   The original implementation of CyberSenga involved adolescents ages 13-18 (average 16.1) and 84% male, who were recruited from two all-boy Protestant schools, a mixed-sex Muslim school, and a mixed-sex public school in Mbarara, Uganda, the seventh largest urban center in Uganda.

Program Components

☐ Adult Involvement
☐ Case Management
☐ Group Discussion
☐ Lectures
☐ Peer Counseling/Instruction
☐ Public Service Announcements
☐ Role Play
☑ Video
☑ Computer-Based Assessment
☑ Other: Online Multimedia Modules

Program Length   CyberSenga consists of five modules to be delivered once per week over a period of five weeks, although more modules can be taken at once if necessary. Each module is 45 to 60 minutes long. A one-hour booster session should be delivered approximately four months post-intervention.

| **Staffing Requirements/ Training** | No counselor or facilitator is necessary to lead the CyberSenga program. It may be helpful to have a staff member available who can answer questions about the program and assist participants who are not familiar with computers. In the original implementation, CyberSenga research assistants scheduled sessions for participants, provided appointment reminder cards, directed participants to computers, and helped them log in to the CyberSenga system as needed. |

| **Program Materials** | This PASHA program package contains everything you will need to implement the the program, including this User's Guide, directions for the CyberSenga online software, and evaluation resources. |

| **Notes about Evaluation** | The following resources for evaluation are included in the program package: |

1. Evaluation Instruments used in the original implementation of CyberSenga
2. *Prevention Minimum Evaluation Data Set (PMEDS)*, a generic questionnaire that can be adapted to suit most prevention programs
3. *Local Evaluator Consultant Network Directory*

These evaluation materials are included as a starting point for evaluating your program, should you choose to do so. Before using these or any other survey instruments with your participants, it is very important that approval is received from the appropriate people in your community (e.g., school officials, parents, etc.). Most programs can benefit from outside help in designing and carrying out an evaluation. Your local university may be a good place to look for outside help—or you may refer to the *Local Evaluator Consultant Network Directory*.

Program Acquisition & Implementation Cost

The cost of this PASHA program package includes one complete set of materials needed to implement this program, the resources for evaluation described above, as well as telephone technical support on program implementation and evaluation for one year (call PASHA staff; see below).

Contact Information

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Bibliography

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