

PROGRAM ABSTRACT

TITLE *HIV/AIDS WARRIORS PROGRAM
ENHANCED HIV RISK REDUCTION*

SUMMARY

Soldiers, many of whom are young sexually active men, act as a “bridge” population for the acquisition and transmission of Sexually Transmitted Infections (STIs). On duty, away from wives, girlfriends, and regular sexual partners, they are likely to seek out temporary sexual partners such as sex workers. They may then act as a “bridge” by spreading STIs/HIV between high-risk groups (sex workers) and the general population (girlfriends, wives, or other sexual partners). Additionally, soldiers from resource-limited countries may face other stressors that influence STI/HIV transmission such as poverty and low levels of education.

Soldiers in the Angolan Armed Forces were found to have high levels of reported STI/HIV high risk behaviors. Over two-thirds of soldiers had two or more partners in the previous year. Fewer than 40% of soldiers who engaged in sex with a casual partner used a condom during their last sexual encounter. These findings indicate a need for sustainable HIV/AIDS prevention strategies applicable to soldiers in resource-limited countries as mobility and cross-border traffic become a growing concern.

The *HIV/AIDS WARRIORS PROGRAM* was developed by researchers from the Angolan Armed Forces and the Charles Drew University of Medicine and Science to provide Angolan military personnel with STI/HIV prevention. A five-session HIV prevention program addresses STI/HIV/AIDS information and transmission pathways, prevention and treatment options, effects of alcohol on decision making, keeping one’s family and self safe, and vulnerability to possible HIV infection. Participants are encouraged to see themselves as “HIV/AIDS Warriors” by increasing social motivation to prevent HIV through informal peer education. Optional monthly booster sessions reinforce the information provided by the initial program.

The program was evaluated with a randomized controlled study implemented on 12 military bases in Angola. Bases were matched by region into pairs and then within each pair each randomly assigned to receive either the control (malaria prevention) or HIV-prevention intervention. Both the malaria prevention and HIV prevention programs were delivered in 4-hour sessions on 5 consecutive days by teams of civilian facilitators. Randomly sampled participants were interviewed at baseline and 3 and 6 months after the completion of the program.

Intervention program participants significantly increased their HIV/AIDS knowledge, perceived vulnerability to HIV and condom use. Intervention program participants also demonstrated fewer unprotected sex acts with girlfriends, occasional partners, and commercial sex partners. They also reduced the number of unprotected anal sex acts with live-in partners and number of occasional and commercial sex partners.

*GLOBAL HIV
ARCHIVE
CATEGORY*

- | | | |
|---|--|---|
| <input checked="" type="checkbox"/> Sexual risk reduction (secondary) | <input checked="" type="checkbox"/> Community mobilization (secondary) | <input type="checkbox"/> Antiretroviral adherence |
| <input type="checkbox"/> HIV testing and education | <input type="checkbox"/> Reproductive health | <input checked="" type="checkbox"/> High-risk populations (primary) |

Primary content categories reflect the main focus of the program, while secondary content categories may be addressed in other aspects of the program.

*IMPLEMENTATION
LEVEL*

- | | | |
|---|---|---|
| <input type="checkbox"/> Individual (implemented one-on-one) | <input type="checkbox"/> Couple/ family (implemented with a couple or family) | <input checked="" type="checkbox"/> Group (implemented in small groups) |
| <input type="checkbox"/> Structural (implemented on social, economic, political, or environmental levels) | | |

*IMPLEMENTATION
SETTING*

- | | | |
|---|--|--|
| <input checked="" type="checkbox"/> Community (implemented through community-based organizations) | <input type="checkbox"/> School (implemented in schools) | <input type="checkbox"/> Clinic (implemented in clinics) |
|---|--|--|

This program was originally implemented on 12 military bases in Angola. It may be feasible to implement this program in other locations such as health centers, clinics, or at other community-based organizations.

*ORIGINAL
TARGET
POPULATION*

The soldiers targeted by the original program were from three regions of Angola (Luanda, Huila, and Malanje), a mix of privates, sergeants, and officers, and primarily between the ages of 18 - 32 years old. Most were unmarried (72%) and had children (81%). All were male. The population is considered a “bridge” population through their potential to spread STIs/HIV between high-risk groups (sex workers) and the general population (girlfriends, wives, or other sexual partners).

The HIV prevention messages presented in the curriculum are applicable to other non-military at-risk “bridge” populations who have the potential to acquire and transmit STIs/HIV.

*PROGRAM
COMPONENTS*

- | | |
|--|---|
| <input checked="" type="checkbox"/> Booster sessions for participants | <input checked="" type="checkbox"/> Formalized curriculum |
| <input checked="" type="checkbox"/> Community outreach/ mobilization | <input type="checkbox"/> Medication adherence and routine clinic visits |
| <input checked="" type="checkbox"/> Condom demonstration | <input type="checkbox"/> Motivational interviewing |
| <input type="checkbox"/> Continual assessment of progress | <input type="checkbox"/> Multi-year program |
| <input checked="" type="checkbox"/> Educational materials (e.g., leaflets, posters, comics, magazines) | <input type="checkbox"/> Needs assessment |
| <input type="checkbox"/> Electronic media (e.g., radio, cell phones, internet, videos) | <input checked="" type="checkbox"/> Peer education/ counseling |
| | <input checked="" type="checkbox"/> Presentations |
| | <input checked="" type="checkbox"/> Role Plays |
| | <input type="checkbox"/> Stakeholder investment |
| | <input type="checkbox"/> STI/HIV testing |

*PROGRAM
LENGTH*

The program is composed of 5 sessions each lasting four hours, implemented over five consecutive days. Optional one-hour booster sessions are offered twice a month for five months following the program.

*STAFFING
REQUIREMENTS/
TRAINING*

Facilitators deliver the *HIV/AIDS WARRIORS PROGRAM* to participants. It is helpful if facilitators have prior experience leading community groups or delivering health information although it is not required. The Facilitator's Manual provides information for the facilitators to review and learn prior to implementing the program.

*PROGRAM
MATERIALS*

The *HIV/AIDS WARRIORS PROGRAM* package contains most of the materials needed to implement the program. The Facilitator's Manual provides specific information on how to prepare for implementation and deliver the program and booster sessions. The original comic book and presentations used during the program are included for the facilitator to use during the program sessions. Photocopy masters of documents needed during the sessions are also included in the program package.

*A NOTE ABOUT
ADAPTATION*

The Global HIV Archive program package includes a Customized Adaptation Handbook to help program staff successfully adapt the *HIV/AIDS WARRIORS PROGRAM* for new settings and target populations. The Adaptation Handbook details a set of pragmatic, easy-to-follow steps to facilitate making changes to the program, while preserving the components that made – or are believed to have made – it effective in the first place.

*A NOTE ABOUT
EVALUATION*

Each Global HIV Archive program package contains the evaluation instruments used in the original program. In the original evaluation of the *HIV/AIDS WARRIORS PROGRAM*, the instruments were administered orally in Portuguese by trained local civilian interviewers in a professional, non-judgmental manner.

The program package also includes an Evaluation Resource Guide, containing select questions to assess relevant HIV outcomes such as sexual risk behaviors and condom use.

If you would like to conduct an evaluation with your population, it is important to assess the applicability of questions to your context/setting. For instance, some questions contain region-specific language and terminology that you would need to adapt to be relevant to your

*PROGRAM
ACQUISITION
AND
IMPLEMENTATION
COSTS*

population. Pre-test the instrument with a small group of individuals representative of your population prior to administering it to the entire group. This pre-test may reveal in advance potentially problematic questions such as questions not well understood by the target population.

Global HIV Archive program packages are available in boxed, flash-drive, and downloadable formats. The cost of this Global HIV Archive program package includes:

- *Quick Guide to Program Package* – a roadmap to get oriented to the *HIV/AIDS WARRIORS PROGRAM* and tips for how to get started;
- *User's Guide* – an overview of the program including information about implementation and evaluation;
- *Facilitators Manual* – a guide on how to implement the program;
- *Presentations* - PowerPoint presentations to use during the five program sessions;
- *Original Comic Book* – a comic book to copy and distribute to participants;
- *Handouts* – photocopy masters of documents needed for the sessions;
- *Customized Adaptation Handbook* – a guide for adapting the *HIV/AIDS WARRIORS PROGRAM*;
- *Original Evaluation Materials* – all questionnaires used to measure the effectiveness of the original implementation including:
 - Baseline Questionnaire
 - 3-Month Questionnaire
 - 6-Month Questionnaire
- *Evaluation Resource Guide* – a set of survey questions for evaluating HIV-prevention program effectiveness.

The following program materials are also available in Portuguese:

- *Checklist of Portuguese Program Materials* – a one-page guide of the Portuguese documents included in the program package;
- *Facilitators Manual (Manual De Formação Do Intervencionista)* – a guide on how to implement the program;

- *Presentations (Apresentações)* - PowerPoint presentations to use during the five program sessions;
- *Original Comic Book (Livro Cômico)* – a comic book to copy and distribute to participants;
- *Original Evaluation Materials* – all questionnaires used to measure the effectiveness of the original implementation including:
 - Baseline Questionnaire (*Entrevista Completa - Primeira*)
 - 3-Month Questionnaire (*Entrevista Completa - Três Meses*)
 - 6-Month Questionnaire (*Entrevista Completa - Seis Meses*).

*CONTACT
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BIBLIOGRAPHY

Bing, E. G., Cheng, K. G., Ortiz, D. J., Ovalle-Bahomon, R. E., Ernesto, F., Weiss, R. E. & Boyer, C. B. (2008). Evaluation of a prevention intervention to reduce HIV risk among Angolan soldiers. *AIDS & Behavior*, 12(13), 384-395.