



NationalSexEd Conference

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The Impact of Being a Peer Sexual Health Educator: Lessons learned from mobilizing African American adolescents against HIV in Flint, Michigan

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RUTGERS

School of Communication
and Information



YOUR Blessed Health

*Building the capacity of the Faith Community
to reduce impact of STIs/HIV*



Presenter Disclosures

Charles Senteio

No personal financial relationships with commercial interests relevant to this presentation existed during the past 12 months.

Important to understand impact of being a peer sexual health educator

- Adolescents use peers as sources of health information and their behavior is influenced by them – delicate health topics are **more effectively addressed** through peer-led health promotion activities¹
- Important to understand impact of participation in a peer sexual health education program, few programs assess **long-term** impact^{2,3}
- Difficult to **assess long-term impact** because *process* evaluation (i.e., delivery) and *outcomes* (i.e., impact) are most commonly obtained at program conclusion⁴
- Evaluations of peer influence for peer-led sexual health education has not included minorities⁴, despite persistent **racial disparities** – in Michigan: AA HIV infection **8x** of all other groups, **85%** of teens with HIV are AA^{5,6}



Designed qualitative study: semi-structured interviews of former peer sexual health educators (n=11; Aug.-Oct., 2017)

- HOPE (**H**IV/**S**TI **O**utreach, **P**revention, and **E**ducation), Project: CDC-funded, STI-reduction program (2009–2014) in Genesee County (Flint), MI to integrate peer sexual health **education** and **technology** for STI/HIV awareness and prevention, emphasis on among youth aged 18 – 24^{5,7-9}. Two types of peer educators, **worked together** to develop and conduct training workshops, staff health fairs, and conduct community presentations:
 - SeXperts (n=6): (aged **12 – 18**) worked very closely with the HOPE project in various capacities
 - Personal Health Information Mentors (PHIMs) (n=5): (aged **18 – 24**) tasked with increasing access and use of sexual health information resources among peers in Genesee County
- Interview Targeted **Personal** Dimensions of **impact**
 - General **impact** of being peer sexual health educator (SeXpert/PHIM)
 - Impact on **personal** development (i.e., self-esteem, health behavior, social network composition), **educational** goals (i.e., programs of study, pursuit of college degrees/certifications), **career** pursuits (i.e., working in health education field, working as a clinician or healthcare provider)

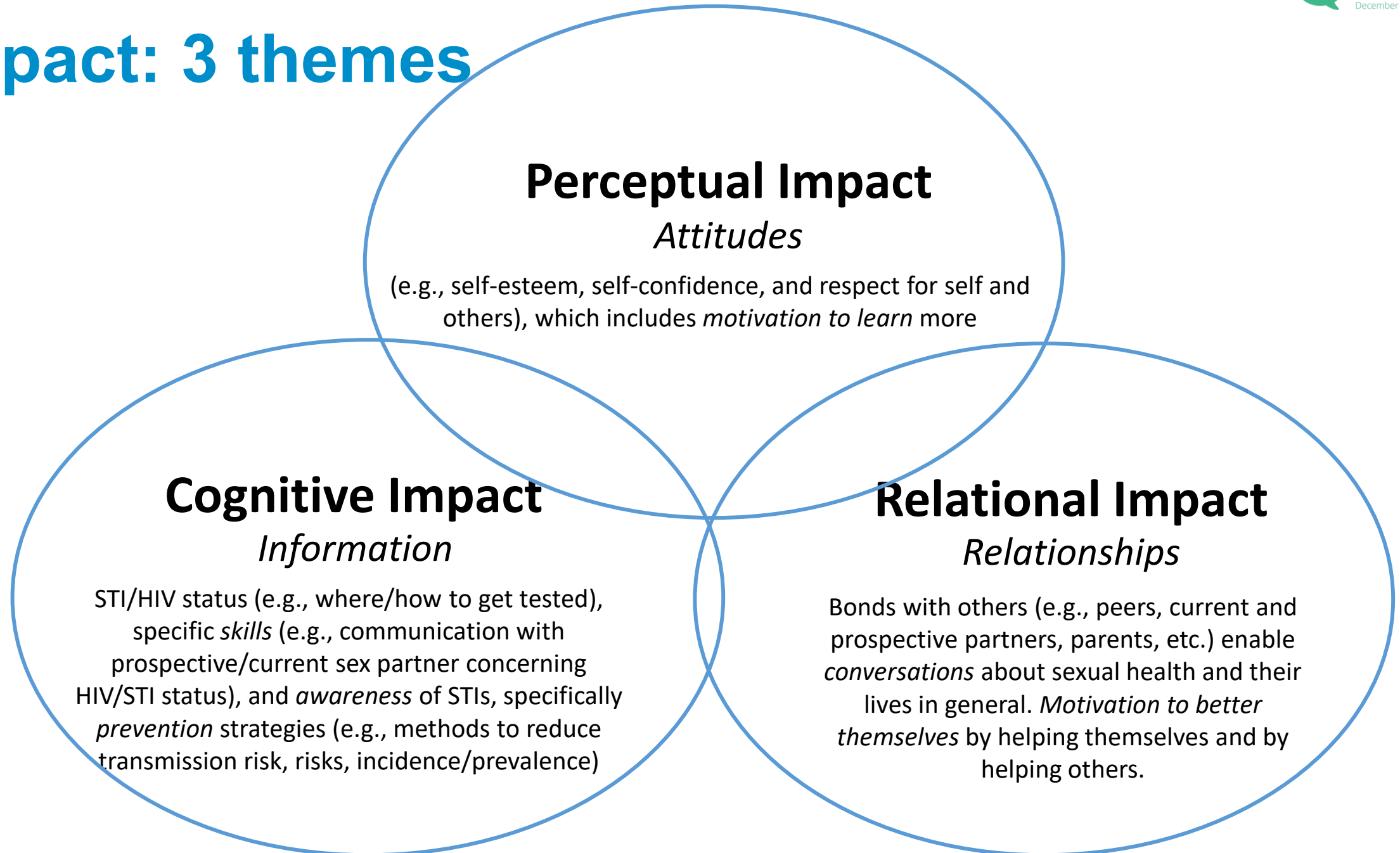


RADaR technique for Qualitative Data Analysis

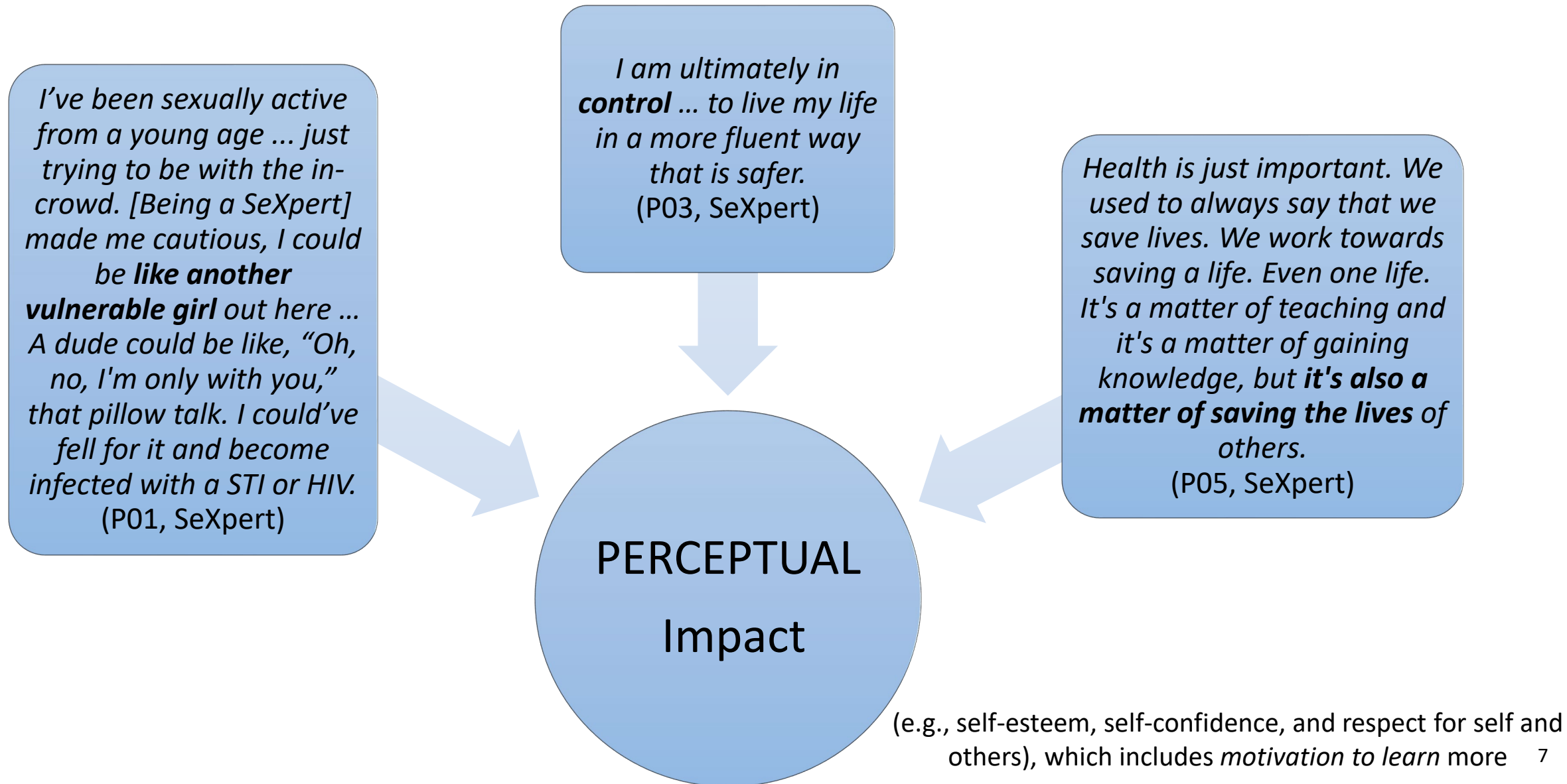
- **R**igorous and **A**ccelerated **D**ata **R**eduction¹⁰ (**RADaR**)
 1. Code
 2. Summarize
 3. Condense all the interview data collected
- Proceeded from *All Inclusive Data Table* → *Final Phase Data Table*



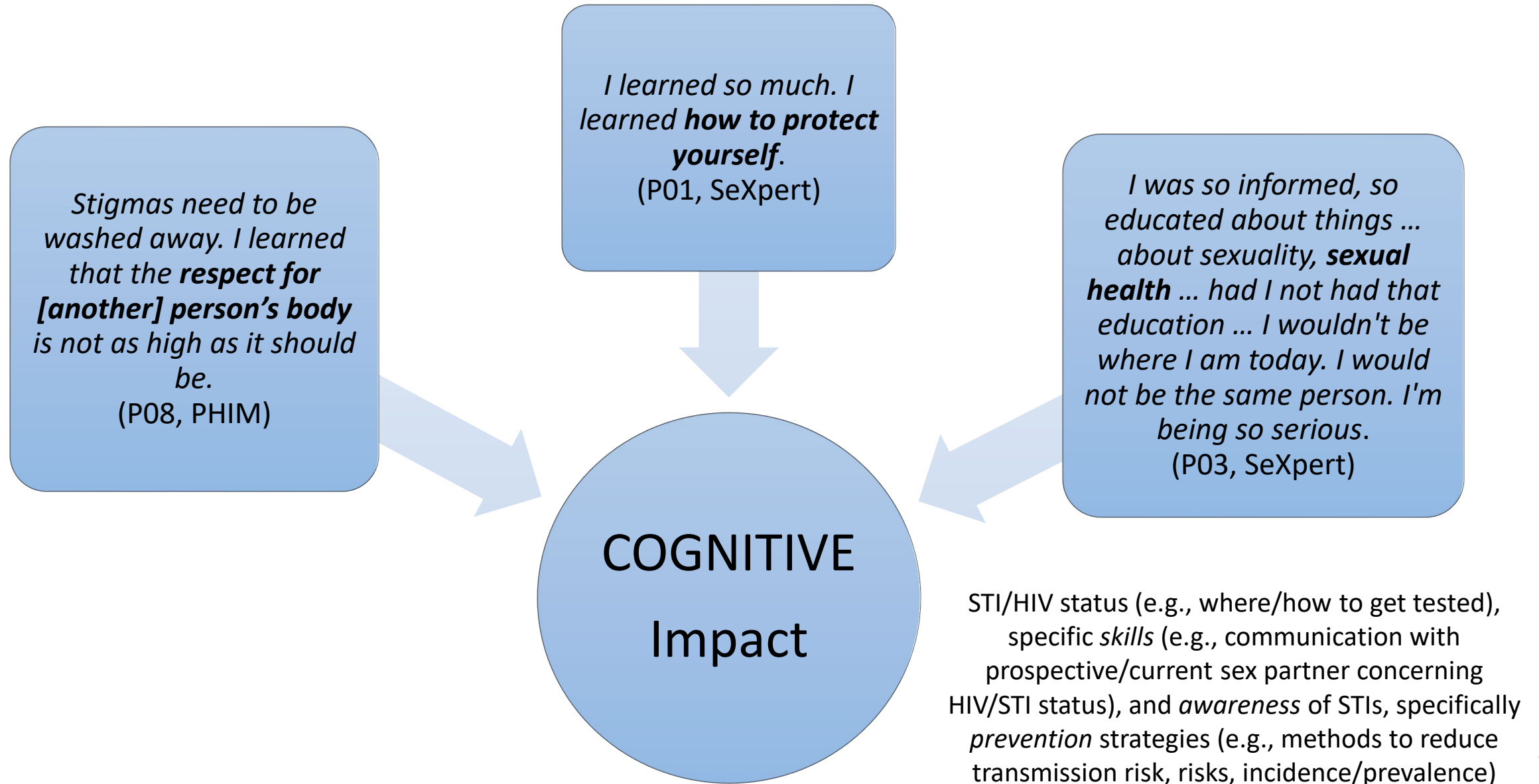
Impact: 3 themes



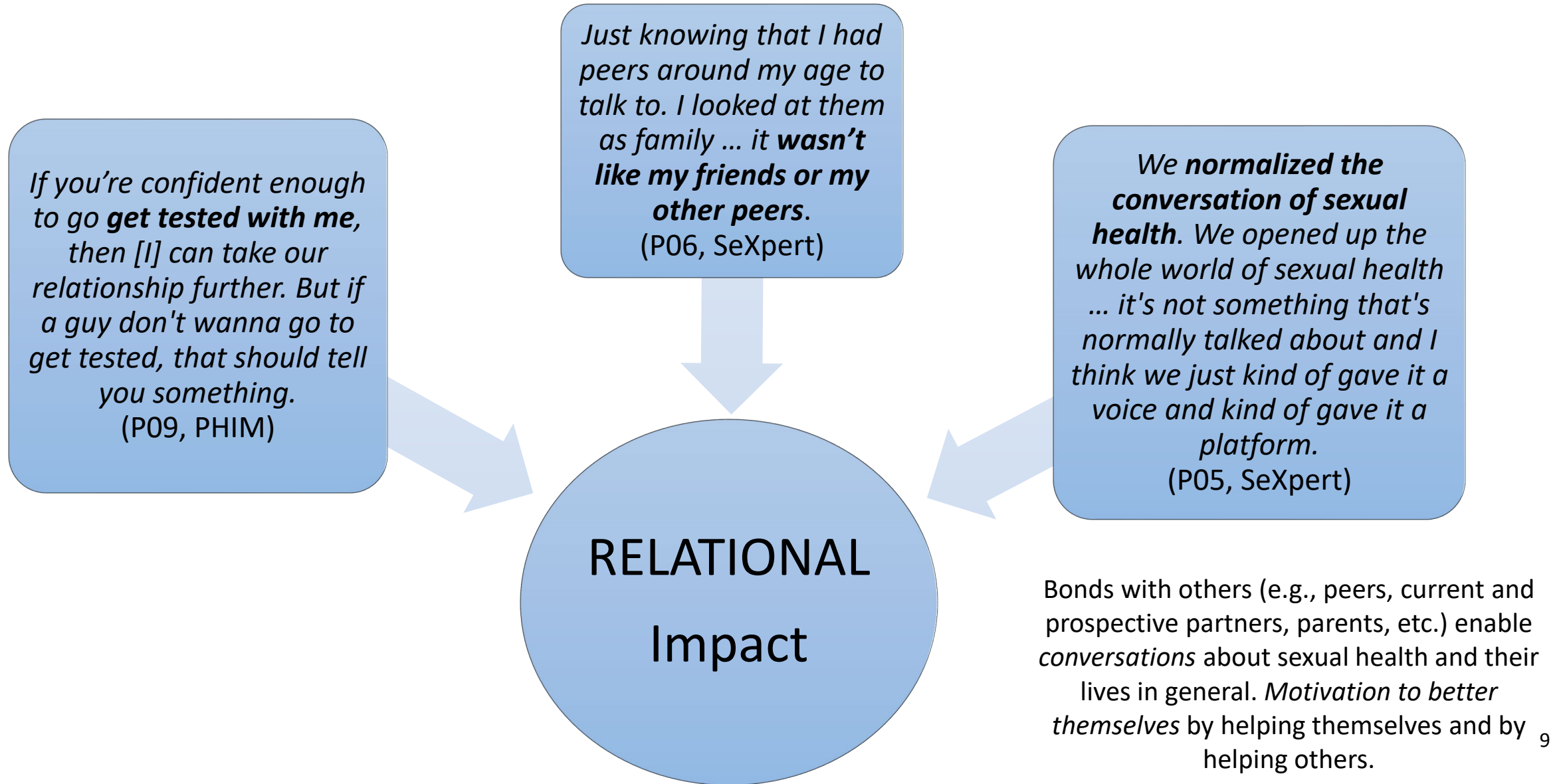
Perceptual Impact



Cognitive Impact



Relational Impact



Implications

1. Former peer sexual health educators continue to be impacted in 3 ways:
 1. **Perceptual** – “own” their sexuality
 2. **Cognitive** – **knowledge** of incidence, prevalence, risk reduction strategies
 3. **Relational** – **empowered** to have sensitive conversations with current or prospective sexual partners
2. Impact “themes” for health educators and practitioners to measure and communicate outcomes
3. Insights to inform strategies to enhance sexual health communication



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Questions and Answers



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Senteio, C. R., Yoon, D. B., Wang, Y., Jinka, S., Campbell, T. R., & Palena, E. (2018). The Impact of Being a Peer Sexual Health Educator: Lessons learned from mobilizing African American adolescents against HIV in Flint, Michigan. *American Journal of Sexuality Education, 13*(4), 425-451. doi:10.1080/15546128.2018.1499163

Sample

Table 1. Demographic Information – Entire Sample

Age as Peer Mentor	No.
14-17	6
18-22	4
23 and older	1
Current Age	
20-23	6
24-27	4
28 and older	1
Gender	
Male	2
Female	9
Race	
African American	11
Years as Peer Mentor	
0-2	7
2+	4
Sex Orientation	
Bisexual	1
Heterosexual	8
Homosexual	1
Lesbian	1
Role	
<u>SeXpert</u>	6
PHIM	5
Year of becoming a mentor	
2009-2010	3
2011-2012	7
2012+	1

Note. Total number of participants ($n=11$)

The Ruth Mott Foundation funded YOUR Blessed Health (YBH) 2006-2013. The SeXperts were an outgrowth of YBH. The PHIMs were a part of the community based advisory group for the HOPE "home party" project , which was funded by the Centers for Diseases Control 2009 -2014 and was a collaboration with the Prevention Research Center of Michigan/U of M School of Public Health.

HOPE is actually the curriculum developed by Dr. TaMara Griffin, that both YBH SeXperts and the PHIMS use for HIV prevention.

YBH is a 5 week -3 hour session for adolescents (11-17)

HOPE (HIV Outreach, Prevention, Education) home parties is a three hour session for young adults and adults (18-24+)

The curriculum focuses on helping participants understand what their values are and based on those values how

- Make decisions based on those values
- How to communicate their decisions about what behaviors they will/will not engage in
- How to negotiate for behaviors they will/want to engage in
- Create a plan for how to keep themselves safe or safer

The session (s) begins with an overview of the reproductive system and how it connects to HIV and other STIs. Sessions are very interactive and includes role plays, games, teach backs etc...

The SeXperts and PHIMs received the same level of initial and ongoing training. They often worked together to develop and conduct training workshops, staff health fairs, and do community presentations.

Impact: Three themes

Perceptual Impact

- self-esteem, self-confidence, self-respect
- “owning” your sexuality
- motivation to learn

Cognitive Impact

- Transmission, prevalence, incidence about STIs/HIV
- prevention strategies

Relational Impact

- interactions and connections with others: peers, current or prospective partners, parents, etc.