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Theme: **Latino Youth and HIV Prevention**

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Antonia is working on a project called *Cuidate* which when translated means “to take care of yourself.” The project focuses on developing a Latino cultural based intervention to prevent sexual HIV risk behaviors. Currently, there are very few evidence based curriculum that is based on Latinos and this project will be the first curriculum available in English and Spanish dedicated to Latinos. It will also be the first study specifically designed for Latinos that will follow the long term effects.

#### Description of Latino Youth

Latino children are not the largest majority in the U.S. although they are a significant population; and are in uncommon places such as Arkansas. One of the strengths for Latino families is that they are more likely to be in a two parent household than African Americans. Research shows that Latino youth also delay having sexual intercourse until later. However, one risk is that when Latinos do have intercourse, it is usually unprotected. Another risk is that Latinos are more likely to drop out of high school and in communities that Antonia has worked in such as Philadelphia and Detroit, that rate is over 50%.

#### Cultural and Social challenges that affect HIV prevention strategies in Latino youth populations

Cultural stigmas have an influence in terms of prevention education, and parents are a good source of support. Risk factors are that there are not a lot of outreach programs for Latinos.

#### Current challenges Latino youth faced in relationship to sexuality

The myth that Latinos are conservative and don't want people to talk to their kids about sex is not true. The extra steps taken to communicate with adolescents have been helpful.

Descriptive work is very slim in current literature and descriptive research to identify what are Latino cultural values that had an influence on sexual behavior. Some people attribute lack of condom use related to machismo or religion and there is no evidence that this is true. The stereotypes continue.

### Programs and strategies that work

Red Cross is an example of a program that has been out for a number of years. However, there are not enough Youth HIV educational programs. We have programs and we are making efforts on an individual level and we think they work but they have not been well evaluated. The research that is science based and evidence based has the perspective that there are very few interventions, not just for Latinos. There are very few Latino researchers and very few are getting funding to do the important work that needs to be done.

### What are some strategies you have found to be effective with Latino youth?

Some strategies that have been effective when helping Latino youth are a theoretical frame work and developing interventions that tailor or at least consider the attitudes, values and beliefs of the population you are working for. In additions, you also should be able to provide them the information and skills practice and the behaviors you want them to do whether it be negotiation, refusal skills or cognitive skills and adequate support. Have interventions in small groups but not only with peers. Find out a way to engage parents and caring adults.

The study conducted by Antonia was designed to study adolescents in an intervention condition and then followed up on for one year. Those who participated in the HIV reduction were less likely to have sex, more likely to use condoms and had fewer partners. These results were the same across all genders and across all those who spoke both English and Spanish.

In Mexico, the set up was the same but included parents to participate and randomly assigned them to either HIV risk reduction program or health promotion control. The parents were separated out from the kids and the parents were given an experimental curriculum to teach their kids about their values. The results for this portion of the project are currently being analyzed. Other results show that adolescents in Mexico are not as sexually active as those in the US and those who participated in the HIV risk reduction did not intend to have sex in the next year. The study also showed that there are higher intentions to use condoms and contraceptives. According to literature that has been published, intention is a good predictor of behavior. The only change in the study in Mexico was that they asked us to provide more info about pregnancy and STDs. Parents who participated in HIV curriculum were more likely to report greater communication about anything and greater sexual communication and greater comfort with sexual communication.

What are the obstacles and barriers that you have experienced or know that exists in the provision of HIV prevention services to Latino youth?

Depending on what school system they are at, there is a limited type of information allowed to share regarding sex education due to Title X. Fortunately, some of the schools were cooperative to the research study and even though we were not allowed to present the program in the school, the school allowed the use of the building, some personnel and gave school and community credit to students who participated. The good thing with youth and youth agencies is they have the same objective and that is to keep the kids safe. Working collectively is very important.

How do we engage parents in prevention efforts?

Parents want their children to have information and don't want them to have sex, but it is difficult to break the barriers because parents don't know how and they are embarrassed. They are receptive to help from those that they trust such as schools, health care professionals and agencies in their own communities they know that work with the population are important resources.

Parents in Mexico wanted to participate in the research study intervention and 20% of the participation was fathers who came with either their daughter(s) or son(s). We are currently developing an intervention in which parents can do and it is a smaller type intervention but innovative.

Parents are willing to put their trust in the project. Get support from parents when designing and redesigning strategies, or seek parents' support when designing. Also recruit parents within the community. Attitudes and values change over time and it is good to recheck people's thinking. Activities that have been effective are conducted on Saturdays because of the large number of kids used for the research and then we follow the students up at a later period.

How do you address differences in intervention approaches between Latinos?

To address differences in intervention approaches between Latinos and youth is to stop thinking like adults and start thinking like kids. We are more alike than we are different in terms of immigration, language and shared religion. Things are more integrative and using the same approach in the past for the 21st century is not going to work anymore.

Biography

Antonia M. Villarruel Ph.D. is Professor and the Nola J. Pender Collegiate Chair in Health Promotion at The University of Michigan. She has an extensive background in health promotion and health disparities research and practice. Her research focuses on the development and testing interventions to reduce HIV sexual risk among Mexican and Latino youth. Dr. Villarruel has been the PI and Co-I of several NIH funded studies. She is also the Director of an NINR P20, which is a partnership with the University of Texas

Health Sciences Center in San Antonio, designed to increase the capacity of minority nurse researchers. Dr. Villarruel has assumed leadership roles in many national and local organizations. She is the Vice-President and founding member of the National Coalition of Ethnic Minority Nursing Associations and past president of the National Association of Hispanic Nurses. She recently served on the IOM Committee “*Examining the Health Disparities Plan of the National Institutes of Health: Unfinished Business*” and also served as a charter member of the Secretary of the Department of Health and Human Services’ Advisory Council on Minority Health and Health Disparities. She has received numerous honors and awards including induction as a Fellow in the American Academy of Nursing and the Trailblazers Award from the National Black Nurses Association.

For more information regarding Dr. Villarruel and her research, you can contact her at [avillarr@umich.edu](mailto:avillarr@umich.edu)

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