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Abstract: Over the last 2 years, the co-authors produced an HIV prevention film for teens in collaboration with four African American women living with HIV. However, there were initially concerns that the experiences and prevention messages in the film would not be relevant to women of other cultures and ethnic backgrounds. Pretesting of the film was completed with African American and Latina teen girls; adult women who were HIV providers of various ethnicities and cultures; and adult Latina, Cape Verdean, and White women as well as adult Haitian men and women. Findings indicated that cultural relevance was strong for individuals who shared gender identity and socioeconomic status.

Key Words: HIV Interventions, Ethnicity

CULTURALLY RELEVANT HIV INTERVENTIONS: TRANSCENDING ETHNICITY

Culturally relevant prevention tools, resources, and interventions are critically needed for the prevention of HIV (Flaskerud & Nyamathi, 2000). Health messages which are perceived as being personally meaningful and relevant may stimulate thoughtful consideration of proposed behavior change (Kreuter & Holt, 2001; Petty & Cacioppo, 1986). Such messages are better attended to and understood, stimulate discussion with others, create a greater intention to change behavior, and are ultimately associated with more behavior change than are generic or impersonal educational materials (Kreuter & Holt, 2001). Flaskerud and Winslow (1998) argued that culturally relevant HIV prevention interventions are likely to be most effective when they build on an under-

standing of the psychosocial factors underlying behaviors in particular ethnic groups, use language familiar to participants, are congruent with participants' cultural values and lifestyles, and are delivered by nonjudgmental persons who are at ease with sexual topics. Researchers and clinicians have designed culturally relevant HIV prevention materials for the deaf community (Crowe, 2003), Asian Pacific Islander American adolescents (Sileo, Prater, Pateman, & Sileo, 2002), Latinos of various backgrounds and age groups (Hatchett, Garcia, & Marin, 2001; Marin, 2003; McQuiston & Flaskerud, 2003), and other cultural groups. These efforts have been successful not only because the distinct messages and images were designed and tailored to these particular groups but (also) because the target populations were involved as key consultants in focus group research and as integral collaborators throughout all phases of development of educational materials and interventions.

Intergenerational prevention education is an intervention strategy that can result in culturally relevant materials and activities because of the shared social history and experience that comes from being members of the same community. Chute (1998) highlighted that African-descended women traditionally learn orally through story telling and dialogue as opposed to through standardized or written materials. Hill Collins (1991) stated that African American women across generations can reveal insights to each other across an "axis of age" re-

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garding social relations and domination that are key contributors to health or disease in their community. Historically, the idea of intergenerational education has meant youth helping older members of their community with meeting health care needs or in creating opportunities to learn new ways of doing things. However, the purpose of the present paper is to discuss an intergenerational education HIV prevention film project that features older women who are HIV positive sharing their experiences and wisdom with African American teen girls.

THE FILM PROJECT

The film project began two years ago with four women concerned about the rising incidence of HIV among teens, especially teen girls, in their neighborhood. These women were HIV positive and were frustrated with apparent lack of concern about HIV among the youth in their families and neighborhoods. They informed us that teens viewed the pills used to treat HIV as being "not such a bad thing" after seeing many people with HIV/AIDS live for up to 10 to 15 years. They relayed comments by teens which further suggested that teen girls viewed living with HIV as being similar to living with diabetes or other chronic disease conditions. They were also troubled by the fact that African American teens expressed little perceived need for practicing safer sex when it was "easy to just get tested." Teens seemed unaware that individuals can be HIV negative at the time of testing but then become positive through seroconversion in a relatively short period of time. Rumors abounded related to young teen girls trying to "save their virginity" by practicing unprotected anal sex rather than having vaginal sex with or without using condoms.

The four HIV-infected women approached the first author to make an HIV prevention film for the teen girls in their community. The women knew the first author from their work together as part of a collaborative group involving a broad variety of HIV service providers (e.g., nurses, physicians, social workers) and persons who were HIV positive, the Healing Our Community Collaborative (HOCC). HOCC offers educational programs for women living with HIV/AIDS as well as their family, friends, and caregivers (DeMarco, Bright, & Johnsen, 2004).

The four women wanted to speak to a generation of teens who could identify with them as African American women who made conscious and unconscious decisions that resulted in the acquisition of HIV. They wanted to help teen girls know that there was no room for apathy when it came to prevention of HIV and other sexually transmitted diseases through safer sex behaviors as well as personal decisions related to the use of drug and alcohol and relationships with partners.

The resulting film, *Women's Voices Women's Lives* (DeMarco, Norris, & Minnich, 2004), was a "powerful" documentary that used "intergenerational education and film as a medium for fostering behavioral change" (Prato, 2003, ¶1). Initially, pretesting and editing involved HIV service providers and African American adolescents. The four women who originally conceptualized and were featured in the film were also actively involved in the initial phases of the editing process. As part of this process, film previews that were intended to give these four women a chance to personally reach out to and interact with youth and HIV service providers (i.e., another goal of these women) helped spread the word about the film throughout the broader Boston community ("The Voices of Experience", 2003). As a result, the authors were approached by Latino, Cape Verdean, and Haitian service providers who also wanted to use the film within their communities.

EXTENDED FILM PRETESTING

Over a one year period, the researchers conducted many informal pretest feedback sessions with approximately 45 volunteer participants who represented a variety of backgrounds. Each session involved between 3 and 12 participants. The four women who were featured in the film continued to be actively consulted during this phase of extended pretesting. The intent at this in point film development was to make sure that revisions were based on feedback from individuals in the community who were either interested in HIV prevention or members of populations with high incidence rates for HIV/AIDS.

Pretest participants included African American and Latina teen girls; women of varying ethnic backgrounds who were HIV providers; lay adult Latina, Cape Verdean, and White women; and lay adult Haitian men and women who were at risk for or living with HIV/AIDS. Many helpful suggestions were offered by participants in early pretest feedback sessions. However, the researchers were baffled that none of the participants mentioned that they could not identify with or relate to the African American women in the film if they were not African American themselves. It has been documented that African Americans prefer visual media sources that feature Black characters (Snowden & Hines, 1999), and it was expected that shared identification would also be desired by members of other cultural groups.

When participants in pretest feedback sessions did not spontaneously address concerns regarding racial or ethnic differences, the researchers specifically asked if anyone in the group felt that the lack of cultural or ethnic match was an issue. Invariably, female participants stated that after the first few minutes of the film, they didn't "see" African American

women. They stated that they only saw "women who lived in the inner city" like them. Female participants of various age groups and backgrounds also stated that the message in the film that had the most meaning for them was how the women silenced themselves in relationships to please others despite the fact that this behavior resulted in devastating physical and psychological consequences for the women themselves (see the film segment entitled "Pleasing Them"). Female participants reported that they thought this message reflected a universal problem for all women, particularly women with low incomes, regardless of ethnicity.

In addition to the HIV prevention messages for teen girls and women, female feedback session participants also commented on how the four women in the film served as role models for women who are HIV positive. Through their courage, the four women demonstrated the importance of talking about experiences with HIV that are unique to women with other women and HIV providers.

Haitian men who viewed the film in informal pretest feedback sessions also thought the messages that were communicated by the four African American women "were powerful". They reported that the film gave them a seldom heard or seen view of what women experience related to (a) receiving positive HIV test results, (b) changing one's life and living in secrecy and stigma, (c) struggling with medication regimens and side effects, and (d) surviving and carrying on with life despite being infected with the virus. Consistent with feedback from female participants, Haitian men also indicated that they were struck by the stories of how the women silenced themselves and put their own health at risk to please the men in their lives. These men then entered into discussions about gender inequalities and the potential for men to misuse their power in intimate relationships. Thus, although the Haitian men reported that the film helped them develop an appreciation for women's experiences of living with HIV/AIDS, the "take home" message for them related more to implications for their interpersonal interactions with women in general rather than the need for specific HIV prevention behaviors for themselves.

CONCLUSIONS

Pretesting of *Women's Voices Women's Lives* took place following production of the original teen version of the film. One of the important findings from the informal pretest feedback sessions was how the HIV prevention messages that were originally targeted at African American teen girls were also meaningful to other groups, particularly adult women at risk for or living with HIV/AIDS and HIV service providers. Subsequently, versions for adult women and health care providers have been produced and

released with few modifications. The four women's efforts to reach out to teen girls with powerful lessons they learned after becoming HIV positive was coined "intergenerational prevention education". However, the informal pretest feedback sessions showed that this intergenerational approach, originally intended for African American teen girls, had intra- and cross-generational effectiveness as well.

Shortly after the film was completed, the co-authors wondered if their commitment to culturally relevant intergenerational prevention education would only apply to African Americans since the images and colloquial language in the film were specific to African American women. However, feedback obtained through informal pretest sessions indicated that shared gender identity and socioeconomic status seemed to be more important than color or cultural background in determining the meaningfulness and relevance of HIV prevention messages to participants. A serendipitous finding was that although the film was originally intended to deliver HIV prevention messages, the four HIV-infected women also provided important information and role modeled behaviors for other women who are HIV positive. Additionally, the women's open and frank discussions regarding their experiences with HIV and self silencing behaviors helped serve to raise the awareness and consciousness of men.

Currently, the teen's and women's version of the film are being widely marketed and distributed with curricula that were created to accompany and enhance the film's impact; the provider version is accompanied by a discussion guide. Ongoing systematic collection and analysis of outcome data related to attitudes, behavioral intentions, and safer sex practices will provide further evidence of the relevance and effectiveness of this intergenerational prevention education medium across diverse audiences. Findings may also suggest areas for tailoring similar projects for delivering HIV prevention messages to youth, women, and men of various cultural groups.

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