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New programme to help reduce STI’s in young women

According to the Joint United Nations Programme on HIV/AIDS, an estimated 1.6 million people aged 15 years and older worldwide were newly infected with HIV in 2017. South Africa has the largest HIV infections in the world, and adolescent girls and young women acquire HIV at twice the rate of their male peers.

The Desmond Tutu HIV Foundation at the University of Cape Town (UCT) is working on an encouraging new programme designed to help reduce the incidence of sexually transmitted infections (STIs), including HIV, among girls and young women.

The recently awarded grant, titled “A multilevel comprehensive HIV prevention package for South African adolescent girls and young women”, will focus on a sexual education and skills building programme that will improve support and communication between girls and young women and their mothers or other female caregivers.

Professor Linda-Gail Bekker, co-investigator on the study, explained that the Informed, Motivated, Aware and Responsible about AIDS (IMARA) programme, an evidence-based comprehensive HIV-prevention package designed by the University of Illinois at Chicago in the United States, will be adapted for a South African context.

“We urgently need to find solutions for young women and adolescent girls in this region. Every week almost 2 000 young women and girls in South Africa get infected with HIV,” said Professor Bekker.

The IMARA programme includes education about STIs, including HIV, as well as communication skills that are designed to strengthen the mother/female caregiver-daughter bond. It also focuses on the importance of healthy peer and romantic relationships, effective parental monitoring and developing positive decision-making skills.

The programme also encourages participants to consider how the media and its portrayal of young women influences their behaviour, and how those behaviours may affect health outcomes.

Apart from helping to prevent STIs, the programme is also designed to increase HIV testing and linkage to care at clinics among South African adolescent girls and their female caregivers.
“We know it is really critical to empower young women to be able to protect themselves. There is also some evidence to show that family support is key, especially from an older female relative, such as a mother, an aunt or older sister,” she commented.

In a randomised controlled study in Chicago, IMARA reduced the risk of new STIs by 45% among black girls aged 14 to 18 years old, compared to the control group.

Professor Bekker explained that the programme will be conducted in two phases. Phase one will take the already developed IMARA programme and adapt it for the South African context in a pilot study involving 50 mother-daughter pairs.

In the second phase they will randomise 525 mother-daughter/caregiver pairs to the now adapted IMARA programme.

Participants will be tested for HIV and other STIs at the beginning of the study, and at six and 12 months after enrolment. HIV counselling and testing and PrEP (pre-exposure prophylaxis) will be offered at each assessment. Participants interested in PrEP or who test positive for an STI, including HIV, will receive treatment at the Desmond Tutu HIV Foundation.

“We hope to understand if this intervention is something that we can roll out more broadly to change the statistics of STIs, unintended pregnancy and HIV in young women and girls,” Professor Bekker concluded.

ENDS

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