Communication Perspectives on HIV/AIDS for the 21st Century

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Reducing Risky Sex Through the Use of Interactive Video Technology

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The goal of the current project was to produce three HIV prevention interactive videos (IAVs), one for each of the highest risk ethnic groups (African American, White, and Latino) of young men who have sex with men (MSM), to reduce HIV risk taking. The overall structure and content of each of the videos was identical except that each of the videos was designed to be appropriate for each group. Pilot research and community advisory boards (CABS), which represented each of the ethnic groups, informed the culturally specific elements for each script (i.e., slang for sexual terms and drugs, proxemics, etc.) These IAVs use a DVD platform, which allowed for greater interactivity (i.e., more choice points), more content, and higher quality content than had our prototype CD-ROM reported in Read et al. (2006).

Description of IAVs

Each IAV is played on a DVD with a standard television and remote control. When played, two guide characters begin by explaining the objectives of the video and setting the story up for the user. Men
who use the video are asked to identify with the main character and are given the opportunity to make choices, seek advice, and guide their character's actions (using their remote control). The user is then taken on a virtual date where he can make choices about where he meets his partner (club or Internet), whether he accepts drugs or alcohol, and finally the type of sex he wants to have, ranging from safe (mutual masturbation) to very risky (unprotected anal sex) or somewhere in between (e.g., oral sex, protected anal sex). The guide characters are always available to give advice about what choice to make. They also reinforce safer choices and gently rebuff the user if his choices are risky. At the end of the video, recaps of the user's choices and the implications of each choice are reviewed by the guides and a condom demonstration is played.

Theory and Development

In developing the content for the IAVs, a review of the literature was conducted and key psychosocial variables were identified. Our previous research indicated that feelings of trust are often barriers to using condoms (Appleby, Miller, & Rothspan, 1999) and that eliciting consideration of future consequences might reduce risk taking (Appleby et al., 2005). We therefore integrated a discussion of consequences (e.g., “even though there are treatments for HIV, they don't work for everyone and the side effects are no picnic”) and addressed feelings of trust by introducing the possibility that some partners, no matter how attractive and healthy they appear, may lie, or not know, about their HIV-positive status. We were also influenced by Bandura's cognitive social learning theory and worked hard to create realistic social situations that would simulate the circumstances under which different types of negotiation might occur. Our goal was to create the when, where, and how of risk-reducing safe-sex negotiations. Using research on implemental intentions (Gollwitzer, 1990; Gollwitzer & Moskowitz, 1996), we sought to activate a series of narrative linkages for viewers according to those specific circumstances they would most likely encounter in real life. Drawing on work by Miller and Read (1991) and Read and Miller (1995), we constructed narratives that served as a self-regulatory “glue” with the intention of increasing safer sex behavior in a variety of future contexts (Miller & Read, 2005; Read et al., 2006). By allowing viewers to create their
own context-specific narratives, we sought to build concrete intentions that would likely be processed heuristically under future similar circumstances. One strength of the video is that it can be sexually arousing, increasing the similarity between the intervention and a typical sexual encounter. Instruction that occurs under psychological and emotional states similar to those under which the behavior will be enacted should improve transfer to the subsequent situation. Because our IAV incorporates safer sex education into a semirealistic context (including sexual arousal), this should greatly enhance the recall and application of critical cognitive and behavioral skills, such as self-control strategies and sexual-negotiation techniques.

Through the use of guide characters, whose role was to provide feedback on a real-time basis, we were able to incorporate frame specific messages according to the type of behaviors selected. For example, prior research has shown that gain frames work best for prevention (i.e., giving praise for successfully negotiating safer sex) whereas loss frames work better in more risky situations (i.e., emphasizing the dangers of deciding not to use a condom). The guides also, in conjunction with the overall narrative structure, provided counter-messages, or resistance strategies potential partners might use to avoid practicing safe sex in order to inoculate and teach viewers how to negotiate around these potential pitfalls.

Pilot research was conducted to identify typical sexual scripts including both verbal and nonverbal communication modalities involved in sexual negotiation and intimate encounters. Pilot questions also focused on specific elements that were intended to be part of the storyline so that the narrative would be authentic for the audience. For example, our pilot data informed us that young MSM are typically connecting for casual sex at bars or clubs and over the Internet. Finally, after preliminary scripts were developed, CABS were used to help modify and strengthen our preliminary scripts.

Production

The production process is complex and demands collaboration with cinema experts. There are two lessons we learned when undertaking production. First, actors, directors, cinematographers, and production designers often want to impose their own creative vision on the production. There are times when such creativity is appropriate and
times when it is not. It is therefore necessary to have a social science representative from the project on site during filming. Sometimes improvisation is inconsequential; sometimes it has great consequence if it changes your message. The director must be taken aside by the on-set researcher and told immediately if there is a problem, so that the scene can be reshot with the appropriate dialogue in the appropriate manner. If this is not done, much of what you need from a research/educational perspective may not get filmed. Second, half of your production budget should be slated for postproduction. In this media form, postproduction is much greater than just editing, color correction, and music. The programming aspect of interactive technology—which allows the viewers to experience their choices in the order of their choosing—is elaborate. Programming is thus labor intensive, and there are few programmers who have learned to push the limits of DVD technology to our level of interactive sophistication. This increases postproduction costs.

Preliminary Evaluation

We are early in the evaluation process of the IAVs, but preliminary results are promising. Participants (ages 18–30) were recruited from Los Angeles County through venue-based sampling and advertising (Internet and print) and must have engaged in unprotected anal sex with either a primary or nonprimary partner in the past 3 months. Participants who viewed the IAV reported significantly higher levels of sexual arousal than those who did not view the IAV (control group). This is important because sexual arousal is a key part of our hypotheses with respect to the recall and application of information contained in the IAV to real-life experiences. Furthermore, behavioral intentions to practice safer sex and self-efficacy (i.e., confidence about one’s abilities to negotiate safer sex) were significantly greater for the IAV group than for the control group.

Those who have viewed the IAVs have generally evaluated them positively. On scales ranging from (1) not at all to (10) very much, median scores were 8 or above on the following key variables: believability of guide characters, cultural and age appropriateness of information, and relevance of the information.
Conclusion

Behavioral data from our prototype study and preliminary data from our current study support the efficacy and salience of IAV as an HIV intervention for young MSM. This relatively new paradigm for health intervention provides a rich integrative theoretical and methodological framework for reaching, tailoring to, and connecting with at-risk individuals who have “tuned out” traditional approaches to behavior change.

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References


