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"We, parents, are indeed the origin of many problems of young people." Delivering 'good things' for parents and communities: findings from the process evaluation of a parenting intervention pilot in rural Mwanza

P. Remes<sup>1</sup>, D. Wight<sup>1</sup>, J. Komrower<sup>2</sup>, V. Bazil<sup>3</sup>, K. Nyalali<sup>3</sup>, M. Kimaryo<sup>4</sup>, J. Changalucha<sup>3</sup>, A. Obasi<sup>2</sup>

<sup>1</sup>*Medical Research Council, Social & Public Health Sciences Unit, Glasgow, United Kingdom,* <sup>2</sup>*Liverpool School of Tropical Medicine, Liverpool, United Kingdom,* <sup>3</sup>*National Institute for Medical Research, Mwanza, Tanzania,* <sup>4</sup>*African Medical Research Foundation, Mwanza, Tanzania* 

**Issues:** In rural Mwanza, community norms and conditions strongly influence youth's HIV/STI risk behaviour. Following a needs assessment, a community intervention is being piloted to respond to parents' demand for parenting skills and ASRH knowledge. Parents/caregivers expressed a need for such an intervention to help them guide youth through a safe and healthy adolescence and protect them against HIV/STIs.

The interaction between parenting and ASRH has been primarily studied in developed countries; little is known on how parenting affects ASRH and HIV/STI risk, and how an intervention can influence parenting, in sub-Saharan Africa. We present results of a rigorous process evaluation of the piloting of a parenting intervention in 2 communities in Mwanza region.

**Description:** Socially-representative opinion leaders (parents/caregivers), join 5 participatory learning sessions (covering ASRH knowledge; parenting strategies; gender/power relations; community efficacy), then facilitate and train small peer groups. Each trained group nominates two members who continue the training cycle with peers in their community. Intervention design and content is based on parenting research and informed by theories of diffusion of innovation, collective efficacy, gendered power, and learning-by-teaching.

Process evaluation was primarily qualitative, and involved session observation, in-depth interviews with participants, post-training interviews, and participant observation of social life, focused on parenting practices.

## Lessons learned:

- Parents/caregivers are highly motivated to improve parenting.
- Trainees are prepared to become trainers.
- Many participants report an increase of ASRH-related communication with spouse, family members (including children), and/or community members post-training.
- A number of parents report behavioural changes, such as spending more time with children or reducing alcohol use.
- Limited participation (25%) of male parents/caregivers.

## Next steps:

- Revising the intervention in light of initial pilot.
- Piloting in two new, distinct communities (mining and rural).
- Develop culturally-appropriate parenting measures for rigorous outcome evaluation.