



The Bureau of HIV/AIDS, Prevention Section conducts HIV research and collects HIV testing and other prevention program data. Each quarter we share data from these initiatives in an effort to inform HIV prevention activities throughout the state.

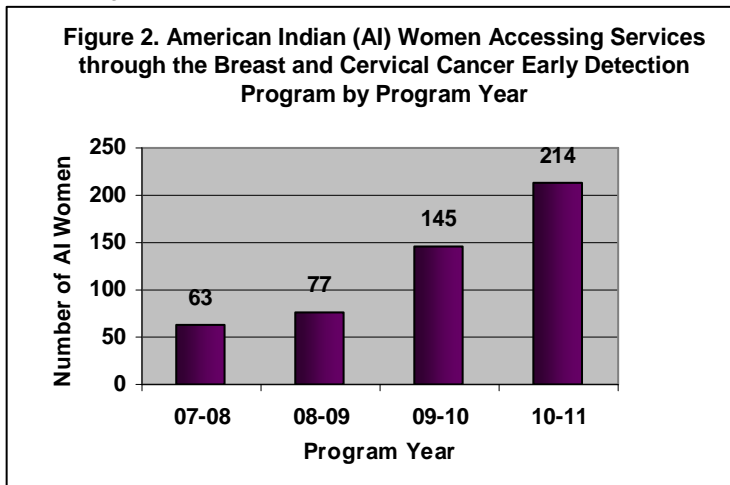
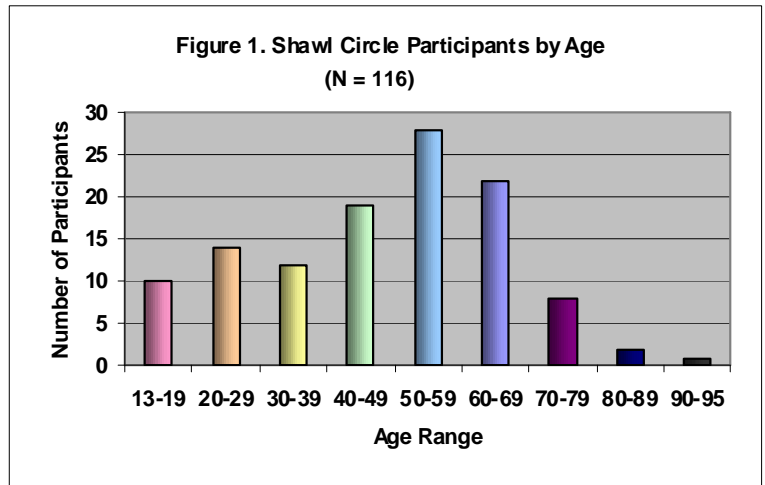


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The Shawl Circle: Reaching Florida's American Indian Women

Although Florida is home to two federally recognized tribal Nations (the Seminole Tribe of Florida and the Miccosukee Tribe of Indians of Florida), it is not thought of as traditional "Indian Country". Currently, Florida ranks 9th in the United States in size of American Indian (AI) population (2010 United States Census). In addition to the reservations, Florida has 12 counties where AI represent more than 1.5% of the total population for that county. These additional areas are home to approximately 147,800 individuals who identify as AI and maintain their culture and traditions. Many of these AI cannot access services through any health facility maintained by Indian Health Services.

The *Shawl Circle* is a community-level intervention created by the Bureau of HIV/AIDS, Prevention Section in collaboration with the Breast and Cervical Cancer Early Detection Program. This project began with a one-day conference that taught initial "Hokvke Yekce" (Muscogee for "Strong Women") HIV prevention and breast and cervical cancer early detection information. These "community health advocates" (CHAs) then returned to their communities and taught the information they learned to their peers. While the HIV, breast and cervical cancer educational material is standardized, the way in which Shawl Circle women choose to present it to women within their tribe, band or clan is their decision. No one understands the cultural traditions of her community better than the Shawl Circle woman herself. After each woman completes a Shawl Circle class, she is presented with a specially designed shawl by the Department which signifies her commitment to keep herself and her community healthy and strong.



Women who attended the Shawl Circle class were asked to complete a pre- and post-test knowledge assessment based on the HIV and breast/cervical cancer curriculum. Overall, respondents had improved post-test scores, but there were several questions that had significant improvement (Fig.3). Question 7 discussed body fluids that are able to transmit HIV, and while the pre-test scores indicated over one-third of the women did not know that breast milk was able to transmit the virus, the post-test scores showed 96.9% of women responding with the correct response (blood, semen, vaginal fluids, and breast milk). Question 12 was a true/false statement which asked whether or not mosquitoes could transmit HIV. At pre-test, 62.1% of participants responded with "false", indicating that over one-third believed that HIV could be spread by mosquitoes; at post-test, 96.3% of participants responded with "false". Question 13 was also a true/false statement which asked whether HIV medications could help prevent mother-to-child transmission of HIV. At pre-test, 62.4% of participants responded correctly, while at post-test, correct responses improved, with 87.5% of participants indicating "true". We consider this locally developed intervention to be a best practice in reaching Florida's American Indian women and their partners. Several states have expressed interest and/or are currently adapting the intervention to suit their AI populations. The Shawl Circle has also been listed by the National Alliance of State & Territorial AIDS Directors (NASTAD) as a Locally-Developed HIV/AIDS Prevention Intervention Profile for the state of Florida. The intervention profile can be found at the following link on NASTAD's web site http://www.nastad.org/Docs/Public/Resource/2011419_EBI%20Profile%20-%20Shawl%20Circle%2004.19.11.pdf. For additional information about these HIV data, contact Mara Michniewicz, MPH, or Marlene LaLota, MPH, at (850) 245-4336, or visit our website at www.FloridaAIDS.org.

Because of the specific traditions of this population, the "Hokvke Yekce" indicated that the Elder women must be the first participants of the initiative. Once Elders accepted the project and proudly displayed their shawls, the project was approved within the AI communities and tribal leaders then encouraged all ages to attend the classes. Of the 116 individuals who completed the class, 24% were age 50 and above (Fig.1). Our oldest participant was 95 and the youngest was 13 (who attended the class with parental approval). The Breast and Cervical Cancer Early Detection Program saw a marked increase in the number of AI women accessing services from the inception of the Shawl Circle program (in January 2010) to present. The number of AI women accessing services increased by 32.2% (Fig.2) from 09-10 to 10-11.

