

was a physical and mental need that could easily be concealed or ignored. c) The researcher had witnessed these women converted into more mature and integral individuals through self-awareness and studying.

Recommendations: These single-parent women should face the previous marriage first. Only by reconciling with self and resolving trauma would they pass

the transformation smoothly. Public or private consultation centers could pay more attention to divorced, separated or widowed women such as support or growth groups.

Conflict of Interest and Disclosure Statement: No conflict of interest

Effectiveness of Two Psychosocial Interventions on Hiv/Aids Knowledge Among Mozambican Women at Sexual Risk

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Introduction and objectives: Women make up an increasing number of HIV infections in Mozambique (UNAIDS, 2016). There are several socio-cognitive factors that influence women's vulnerability towards HIV/AIDS, namely knowledge about HIV/AIDS (Abdu et al., 2016). The objective of this study was to evaluate the efficacy of two psychosocial interventions—Didactic and ACCENT—on HIV/AIDS knowledge, in vulnerable Mozambican women.

Method(s) and sample: The study design was a randomized controlled trial on Mozambican women at HIV/AIDS risk ($n=150$). The participants were randomized into three groups: Didactic Intervention (experimental group—information-only), ACCENT intervention (experimental group—skills training) and control group. HIV-related knowledge was assessed by 14 items ($\alpha = .82$), using two subscales: HIV-transmission knowledge ($\alpha = .80$), eight items, and HIV prevention knowledge ($\alpha = .62$) assessed by six items. The scale has three response options (true, false, I don't know).

Results: The results of the independent t-tests for the comparison of the ACCENT and Control groups

at post-test, indicated significant differences in HIV-transmission knowledge, $t(109)=3.95$, $p < .001$, HIV-prevention knowledge, $t(109)=6.54$, $p < .001$. The *t*-test comparison between Didactic and Control groups revealed there were significant differences in HIV-transmission knowledge, $t(105)=3.42$, $p < .001$, and HIV-prevention knowledge, $t(105)=5.88$, $p < .001$. Lastly, when comparing the ACCENT group and Didactic group at post-test, there were no significant differences in HIV-transmission knowledge, $t(108)=1.32$, $p = .190$ and HIV-prevention knowledge, $t(108)=0.72$, $p = .472$. Both interventions were equally effective in increasing HIV/AIDS knowledge.

Conclusion and recommendations: Effective programs to prevent HIV infection among women at sexual risk are urgent in Mozambique. Because both interventions are effective, the choice of intervention modality may be determined by the availability of personal, financial, and time resources.

Conflict of Interest and Disclosure Statement: No conflict of interest