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US and Scottish Teen's Reflections on Sexual Risk Reduction: Common Healthcare Intervention Challenges Across Continents

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Purpose: Understanding the social determinants of health and their impact on effective, evidence-based interventions that promote health and wellness in communities is an ongoing need in adolescent health. Sexual risk behaviors continue to pose threats to the health and well-being of adolescents around the globe, yet there are still few targeted interventions which have demonstrated multiple improvements in behavioral outcomes. Initially tested in a full-scale RCT with 738 sexually-active girls ages 15-19 years (Morrison-Beedy, et.al., 2012), the Health Improvement Project for Teens (*HIPTeens*) is a gender-specific sexual risk reduction intervention recognized by the Centers for Disease Control (CDC) and US Department of Health and Human Services (DHHS) as having a strong evidence-base for HIV/STI and pregnancy prevention. Future intervention modification to extend this intervention across genders and other cultural and demographic categories is needed. The purpose of this study was to analyze an integrated data set from multiple studies conducted in the formative work for this intervention with sexually-active and abstinent teens of both genders in two countries to identify common themes and threads addressing risk-taking and protective behaviors.

Methods: We conducted three studies with a total of 72 adolescents participating in twelve focus groups carried out in both the US and Scotland. Following IRB approval, these teens were recruited from after-school programs, community teen-based clinics and social agencies, an urban community “cafe” and by word-of-mouth. We enrolled both sexually active and abstinent participants of both genders the majority of whom were economically-disadvantaged young people of color (64%). Following standard focus group methodological protocols (e.g., trained moderator, focus group script, sessions taped and transcribed verbatim) we conducted within- and between-group content analysis within each study and jointly, identifying and confirming predominant codes and themes. Using conventional content analyses focusing on intentions, meaning and context, we employed an open-coding scheme which allowed manually-coded themes. We established trustworthiness during the analysis in several ways including: (a) providing an audit trail of what was done and why; (b) debriefing post focus group; (c) presenting rich descriptions of the study and data; (d) incorporating field notes into the analysis where indicated and (e) using an independent transcriptionist with word-by-word transcription. Credibility of the study was established by: (a) including adolescents of both genders with diverse sexual experiences (including those with no or very limited experience) and dependability enhanced by: (b) use of a single trained moderator and (c) detailed interview guide.

Results: Participants were ages 14-19 and predominantly female (85%) and sexually-active (58%) with multiple risk behaviors. In initial analyses across studies, data saturation in thematic responses very much reflected thematic responses within groups regardless of gender or sexually-activity history. Predominant themes included: (1) *knowing the facts is different than knowing how*; (2) *communication and negotiation skills are critical gaps*; (3) *risky sex often occurs in public or unfamiliar places and with concurrent use of substances*; and (4) *teens have significant stress over remaining abstinent or practicing safe sex*. However, differences were identified by gender. For girls, an exclusive theme was *there is always some risk to self and health with sex*. In contrast for boys, a predominant theme was *you're always willing to take the chance if you can get the sex*. In discussions regarding the use of gender-specific interventions, girls clearly indicated they wanted all-girl interventions so they could feel safe and heard. On the other hand, males said “boys will be boys” in all-male groups but would interact more positively in mixed-gender groups.

Conclusion: These findings provide evidence of continued risk in teens and unique social-behavioral challenges that must be integrated into intervention strategy modification. A continued focus on communication and negotiation skill-building is important for sexual risk reduction interventions.

Concurrent substance use remains a critical influence on sexual risk taking behaviors and intervention strategies must integrate both behavioral challenges. Understanding the impact of stress, anxiety and depression in teens on evidence-based intervention outcomes, particularly as they impact sexual risk-taking behaviors is a gap that remains in both intervention and dissemination/implementation science. Future work must consider whether gender-specific interventions benefit one gender more than the other; much research still needs to be conducted to determine best ways to tailor and refine sexual risk reduction interventions for teens.

Title:

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References:

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Abstract Summary:

Tailored sexual risk reduction interventions for teens can be guided by formative focus group data. Results of three separate studies with US and Scottish teens identified similar risk and protective behaviors and concerns across sexually active and abstinent teens. Themes identified that differed by gender concerned safety and sexual gratification.

Content Outline:

1. Sexual risk behaviors continue to pose threats to the health and well-being of adolescents around the globe, yet there are still few targeted interventions which have demonstrated multiple improvements in behavioral outcomes.
2. The purpose of this study was to analyze an integrated data set from multiple studies conducted in the formative work for this intervention with sexually-active and abstinent teens of both genders

in two countries to identify common themes and threads addressing risk-taking and protective behaviors.

3. We conducted three studies with adolescents participating in twelve focus groups carried out in both the US and Scotland.
4. Predominant themes included: (1) *knowing the facts is different than knowing how*; (2) *communication and negotiation skills are critical gaps*; (3) *risky sex often occurs in public or unfamiliar places and with concurrent use of substances*; and (4) *teens have significant stress over remaining abstinent or practicing safe sex*.
5. These findings provide evidence of continued risk in teens and unique social-behavioral challenges that must be integrated into intervention strategy modification.

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Author Summary: Dr. Morrison-Beedy joined The Ohio State University in 2018 as the Chief Talent and Global Strategy Officer and Centennial Professor of Nursing. In 2016-17 she was a Fulbright Scholar in Scotland, UK and was recently listed on the Fulbright Specialist roster and had a Senior Administrator Fulbright Award (France). In 2015 she was inducted into the Sigma Theta Tau International Nurse Researcher Hall of Fame.