# Technology-Based Health Intervention with At-Risk Teens in Domestic Violence Shelters: A Pilot Study

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# Objectives

- Describe the feasibility and satisfaction results of a pilot Time4U Teen Health (T4U) intervention with at-risk teens in shelters
- 2. Describe lessons learned from pilot T4U



#### Violence

- Violence is a global healthcare issue
- Intimate partner violence 

  physical, sexual, or psychological harm by a current or former partner or spouse
- Parental IPV is witnessed by approximately 5.5 million American adolescents



#### Parental IPV and Adolescent Health

 May be vulnerable to negative health behaviors

- substance use
- tobacco use
- disordered eating
- sexual risk-taking
- teen dating violence







#### Resources

- IPV survivors seek help at domestic violence shelters (DVS)
- Many DVS offer peer or professional counseling to assist IPV survivor
- Counseling services for survivor's children often not offered due to limited resources



### Purpose

Assess the feasibility and acceptability of the 4-week Time4U Teen Health intervention (T4U)



# Design & Sample

- Quasi-experimental, crossover design with 2 groups
- Adolescents ages 12-18 years
  - Exposed to parental IPV
  - Have 1+ of target risk behaviors





## **T4U** components

- Four real-time motivational interviewing (MI) sessions delivered using FaceTime®
- Online written health messages
- Online daily tracking of health behaviors







## Sample

- 28 adolescents (T4U=13; AC=15)
  - 61% female
  - 74% black, 15% white, 7% more than 1 race
  - Median age = 14 years



# Feasibility

- 83% Recruitment
- Session attendance rate
  - 1=100% 2= 85.7% 3+ = 68%
- 64% Retention (post-intervention and follow-up)



#### **T4U Satisfaction**

- Session Satisfaction = 92.34 (out of 100)
- Messages = 27.17 (out of 32)
- Tracking system = 27.42 (out of 32)



#### Qualitative Interviews (4 T4U, 4 control)

- Participants in both groups like program
- Comfortable with sessions via FaceTime®
- Perceived benefits
  - T4U: "learn stuff" about target behavior, engage in behavior change
  - Control: opportunity to express themselves, learn "right from wrong," and take their mind off being in the shelter



"[You] pick something that interests you, talk to someone about it, and learn how to fix or prevent it."



#### FaceTime® sessions

- Praise for the lay health workers (i.e. counselors)
  - Fun and easy to talk to
  - "made me feel comfortable" (AC)
  - "like talking to a friend" (T4U)
- Most wanted more then 4 sessions



# Suggested Improvements

- Messages/Tracking system
  - Remind teens daily to visit website
  - Allow teens to use own device

- Technology
  - Deal with "glitches" in FaceTime®



#### Discussion

- Recruitment rate acceptable but retention rate too high
- Overall adolescents satisfied
- Feedback from teens valuable to make improvements
  - Intervention
  - Mode of delivery



#### Limitations

- Small sample size
  - 28 enrolled, 18 completed
- Convenience sampling
- Only 2 urban-located shelters involved



#### Lessons

- Use multiple strategies to promote participant engagement and retention
- Gauge acceptability of all intervention components
- View study participants as experts when seeking feedback



# QUESTIONS



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