Initiation of Sexual Intercourse and Protection Practices: An Evidence-Based Replication of "Reducing the Risk"



Marlene Bengiamin PhD, John A. Capitman PhD, Cindy Ballesteros BS, Brittany Chambers MPH



Tulare Community Health Clinic

Introduction

Program Goal: To reduce teen pregnancies in the cities of Tulare and Alpaugh, California by teaching evidence-based curricula in the local schools.

Target Population/Setting: This study focused on ninth graders who attended Tulare Union, Tulare Western, Mission Oaks, and Alpaugh High School during years two and three of full implementation of Reducing the Risk (RTR).

Evaluation Design: A quasi-experimental phased cohort longitudinal design, where pretest and follow-up test data were scheduled to be collected over a

five year period (2011-2015).

Program Model: This project implemented RTR which focuses on a teen pregnancy prevention program to reduce teen pregnancy and the transmission of STIs and HIV among high-school students. RTR uses the social learning, social influence, and cognitive-behavioral theories to teach students intrapersonal skills they can use to abstain from sexual intercourse and to prevent teen pregnancy and HIV/STIs. RTR presents both abstinence and condom use as the most effective methods to prevent teen pregnancy and HIV/STIs, with abstinence being the only 100% method. (Kirby, Barth, Leland, & Fetro, 1991).

Objectives: 1) To identify predictors (i.e., gender, ethnicity, mother's education, college expectation, attitudes about abstinence, birth control, condom use, teen pregnancy, and intent to be sexually active) of students' who reported prior sexual activity before the implementation of RTR and; 2) to compare the impact of the program (i.e. attitudes about abstinence, gender, birth control, condom use, and teen pregnancy, and intent to be sexually active) between those students who reported "yes" to ever having sexual intercourse (past sex group) to those who reported "no" to ever having sexual intercourse (no sex group).

Results

The project served 1,539 students during Years 2 and 3. 1,369 students from Tulare Union, Tulare Western, Mission Oaks, and Alpaugh High School took the pre and post test with 909 completing pre-test and one year follow-up test. At baseline, 53% of the past sex group were more likely to be male, 71% were from Hispanic descent, at pretest 81% reported college expectation compared to 86% for the no sex group, 67% of the past sex group agreed that abstinence was a good choice at pretest compared to a slight increase to 74.3% at follow-up, the past sex group reported low negative attitude about teen pregnancy (4.3%) in pretest compared to 7.6% at follow-up (there was no change in sex intent for the past sex group (61%) were likely to have sex in the next year at pre and posttest). Program impact for condom use was 64.7% at follow-up (Table 1).

Discussion of Results: RTR may be more effective in preventing pregnancy and HIV/STIs among students who are not yet sexually active. Further, RTR does appear to successfully impact students' decisions, who have already initiated sexual intercourse, to practice safe sex; however, it does not influence them to become abstinent. In comparing results from this study to other studies that implemented RTR, participants in this study were more likely to be Hispanic/Latino, to live in rural communities, and less likely to initiate sex over the program year.

References

Kirby, Barth, Leland, and Fetro (1991). Reducing the Risk: impact of a new curriculum on sexual risk-taking. Family Planning Perspective 23(6):253-63.

Contact Information

Marlene Bengiamin, PhD

Phone: 559-228-2167

Email: marleneb@csufresno.edu

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Table 1: Differences between Pretest and One-Year Follow-Up Data for two years post program implementation, Students who Initiated Sexual Intercourse, and Students who Delayed Sexual Intercourse

| | Pretest | | One Year Follow Up | |
|--|---------------------------|---------------------------|---------------------------|--------------------------|
| | Past sex group N=95 | No Sex group N= 791 | Past Sex Group N=51 | No sex group N=329 |
| Demographics: | | | | |
| • Gender | 53% | 41% | - | - |
| • Ethnicity | 71% | 72% | - | - |
| Mother's education | 39% | 47% | - | - |
| College expectancy | 81% | 86% | _ | _ |
| Intervention Outcome: | | | | |
| Parent communication (1-6) | 2.6(2.0)* | 2.7(1.9) | 2.8(2.2) | 2.7(2.1) |
| STD/HIV Knowledge (1-19) | 7.0(2.1) | 6.3(1.9) | 7.6(1.9) | 7.1(1.9) |
| Positive attitude Abstinence | 67.0%* | 90.0% | - | - |
| Negative attitude Teen Pregnancy | 4.3% | 3.9% | 7.6% | 4.4% |
| Sex Intent (likely) | | | | |
| Safe Sex Practices | 61.0%* | 6.7% | 61.0%* | 7.8% |
| Perceived Program Impact | | | | |
| Birth Control | | | 1.5(1.0) | 2.0(1.1) |
| • Condom | 31.9%* | 21.7% | 38.2%* | 30.0% |
| Positive attitude abstinence | 59.0%* | 99.0% | 64.75* | 99.2% |
| | | | 74.3%* | 94.0% |



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Table 2: Differences between Sexual Intercourse Initiation Groups in Outcome Measures Controlling for Baseline Characteristics (n= 725)

| | Past sex group | No sex group | |
|--|----------------|---------------|--|
| | Adju | Adjusted Mean | |
| STD/HIV Knowledge (1-19) | 7.5 | 7.2 | |
| Parent communication (1-6) | 3.1 | 2.9 | |
| Positive attitude Abstinence | .24* | .54 | |
| Negative attitude Teen Pregnancy | .085* | .035 | |
| Birth Control | .68 | .72 | |
| • Condom | .72 | .77 | |
| Sex Intent (likely) | .53* | .098 | |