

# **PREGNANCY PREVENTION INTERVENTION IMPLEMENTATION REPORT**

## **Program Name**

*FOCUS: Preventing Sexually Transmitted Infections and Unwanted Pregnancies in Young Women*

## **Developer**

Dr. Cherrie Boyer; Dr. Mary-Ann Shafer; Dr. Richard Shaffer

## **Program Description and Overview**

The goal of this program is to provide a curriculum-based intervention to educate young people on issues such as responsible behavior, relationships, pregnancy and STD prevention and to promote healthy behavior and responsible decision making in the lives of young women.

*FOCUS* is an eight-hour intervention consisting of four 2-hour sessions. The sessions are broken down into a varying number of discrete modules. Although there are interactive activities (e.g., role-play exercises, visualizations, etc.), the modules are constructed primarily around the PowerPoint slide sets, accompanied by lecture and augmented with discussion and other activities.

- **Session 1:** Increase knowledge about unintended pregnancies and STDs including HIV/AIDS.
  - Modify values, beliefs, and attitudes that impact sexual behavior.
- **Session 2:** Increase knowledge about hormonal and barrier contraceptives.
  - Build communication skills to prevent risky sexual behaviors and increase condom use.
- **Session 3:** Increase knowledge about the signs, symptoms, and consequences of STDs/HIV/AIDS.
  - Increase knowledge about the transmission and prevention of STDs/HIV.
  - Build communication skills to prevent STDs/HIV.
- **Session 4:** Modify attitudes about the effects of alcohol and its relationship to sexual risk behaviors.
  - Build refusal communication skills.
  - Build condom use skills.
  - Increase awareness about how life choices can impact decision-making and health.

## **Core Components**

### **Content Components**

- Contraceptive Education
- Behavioral Skills Development
- Self-Efficacy/Self-Esteem
- Sexuality/HIV/AIDS/STI Education

### **Pedagogy Components**

- Group Discussions
- Lectures
- Role Play
- Video
- Power Point slide presentation

### **Implementation Components**

- Eight hour intervention
- 4 two-hour session
- Sessions are broken down into a varying number of discrete models
- Groups of 20-25 females
- Participants age 17 or older
- Facilitated by health educators or other female facilitators who are familiar and comfortable with mature subject matter

### **Target Population**

#### **Target Population Evaluated**

- Female Marine Corp recruits
- Age 17 or older (90% of the sample population was 21 years of age)

#### **Potential additional target population noted by developer**

- *FOCUS* is suitable for 16 year olds, however, may not be appropriate for participants under the age of 16 due to the mature subject matter

### **Program Setting**

#### **Program Setting Evaluated**

- Marine recruit volunteers
- Both experimental and control groups received interventions of four two-hour sessions delivered during the first, second, fourth, and twelfth weeks of recruit training

#### **Potential additional setting noted by developer**

- Suitable for use in group or class settings in clinics
- Suitable for use in community-based organizations
- Suitable for use in schools/colleges

### **Program Duration**

- Eight hour intervention
- 4 two-hour sessions

### **Curriculum Materials**

Curriculum materials are available from Sociometric Corporation Program Archive on Sexuality, Health, and Adolescent (PASHA) at <http://www.socio.com>.

### **Adaptations**

Basic allowable adaptations:

- All proposed adaptations must be approved by developer
- FOCUS can be implemented in different settings- clinics, community-based organization, or schools/colleges
- Session size can be increased above 20-25 (would not recommend more than 35 in a session)
- Sessions can be longer or shorter if necessary

## **Program Focus**

The *FOCUS* intervention focuses on STD and pregnancy prevention.

## **Research Evidence**

- Study Citation:** Boyer, C.B., Shafer, M., Shaffer, R.A., Brodine, S.K., Pollack, L.M., Betsinger, K., Chang, Y.J., Kraft, H.S., & Schachter, J. (2005). Evaluation of a cognitive-behavioral, group randomized controlled intervention trial to prevent sexually transmitted infections and unintended pregnancies in young women. *Preventative Medicine, 40*, 420-431.
- Study Setting:** Marine recruit training base
- Study Sample:** 2,157 female Marine recruits who participated in the study during their first 13-week training period
- 54% ages 17-18, 36% ages 19-21, and 10% ages 22 or older
  - 56% white, 20% Latina, 16% African American, 3% Asian or Pacific Islander, 2.5% Native American, and 2.6% other
- Study Design:** Cluster randomized trial. Study participants were randomly assigned by platoon to either a treatment group that received the *FOCUS* intervention or a control group that received a health-promotion intervention on diet, physical activity, and cancer prevention. Surveys were administered immediately before the program (baseline) and at approximately one and eleven months after the program ended. Biological screening was conducted for pregnancy, chlamydia, gonorrhea, and trichomonas.
- Study Rating:** The study met the review criteria for a **high** study rating.
- Study Findings:** Eleven months after the program ended:
- Participants in the intervention who were sexually inexperienced at baseline were significantly less likely to report having had multiple sexual partners since graduating from Marine recruit training.
  - The study found no statistically significant program impacts on the number of sexual partners for participants who were sexually experienced at baseline.
  - The study found no statistically significant program impacts on consistency of condom use for any group of study participants.

The study also examined program impacts on measures of sexually transmitted infections and unintended pregnancies. Findings for these outcomes were not considered for this review because they did not meet the review evidence standards. Specifically, findings were reported only for certain subgroups of study participants, depending on where they were deployed after completing Marine recruit training. The findings may be biased if deployment decisions were nonrandom.

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