A WORD FROM THE EXPERTS

Safer Sex Intervention
Interviews with Developers of Evidence-Based Programs for Teen Pregnancy Prevention
This webinar was developed by Child Trends under contract number GS-10F-0030R for the Office of Adolescent Health; U.S. Department of Health and Human Services as a technical assistance product for use with OAH grant programs.
Inclusion on the HHS Teen Pregnancy Prevention Evidence Review does not indicate HHS or OAH endorsement of a program model.
Safer Sex Intervention

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Program description

Program goals:
- Reduce sexual risk behaviors
- Prevent recurrent sexually transmitted infection (STI)

Target population:
- Young women age <24 diagnosed with an STI

Key components:
- Knowledge about STIs
- Perception, attitudes, & comfort with talking about sexual health, STIs, and prevention
- Intention to use condoms or abstain
- Skills to use condoms, negotiate safer sex, talk about STI and pregnancy prevention with partner

Delivery methods:
- 1:1 face-to-face by female health educator in a single 30 to 50-minute session
- Boosters at 1, 3, 6 months
- DVD player or computer, penis model, pelvic model
Previous evaluation results

- Study #1
  - Randomized controlled trial of Safer Sex vs. standard care
  - Population: 123 young women age 13-23 with cervicitis or pelvic inflammatory disease. Patients of outpatient adolescent clinic or inpatient at urban children’s hospital
  - Findings: Young women receiving Safer Sex
    - 1 month: Increased sexual risk knowledge, more positive attitudes toward condoms and tended to report using condoms more with a non-main partner
    - 6 months: Less likely to have had sex with non-main partner
    - 12 months: Tended to be less likely to have current main partner and less likely to have recurrent STI
Target population

- **Evaluated populations**
  - Racially and ethnically diverse, ranging from 14% - 89% white, 9% - 49% black, 10% - 25% Hispanic
  - Up to ~ 40% living in economic hardship
  - Rural, suburban, and urban

- **Target populations**
  - Female
  - English-speaking
  - Health clinic patients
Settings

- **Evaluated settings**
  - Adolescent medical clinics
  - Inpatient adolescent units

- **Other settings**
  - Reproductive health clinics
  - School-based health clinics
Potential adaptations

- Applying the intervention to sexually active girls without STI
- Conducting boosters via video-conferencing using video chat and instant messaging software
- Changing gifts given during intervention session

Note: TPP grantees must obtain prior approval from OAH for any adaptations.
Staffing and training considerations

- **Staffing considerations**
  - Trained female educator
  - Have been health educators, nurses, public health students

- **Training considerations**
  - Train the Facilitator (2 days)
  - Train the Trainer (3 days)

- **Consultation**
  - See *Safer Sex Intervention* website
Challenges and strategies for success

- **Common challenges**
  - Identifying appropriate patients
  - Creating smooth referral process
  - Optimizing recruitment strategies
  - Overcoming barriers to retention
  - Monitoring fidelity

- **Strategies for success**
  - Cultivating relationships with clinic staff
  - Making program enticing—creative media strategies, ads, and incentives
  - Being flexible with scheduling
  - Using social media and video-conferencing for reminders and boosters
Recent or planned curriculum revisions

- Developer has flexibility in the adaptations organizations may want to implement. See link to adaptation kit on Slide 12.
- No plans to release a revised curriculum
Additional resources

- HHS Teen Pregnancy Prevention Evidence Review
  - [http://tppevidencereview.aspe.hhs.gov/](http://tppevidencereview.aspe.hhs.gov/)

- Link to implementation report

- Link to developer’s website

- Link to distributor

- Link to adaptation kit
  - [http://recapp.etr.org/recapp/documents/programs/SSI_Adaptation_Kit.pdf](http://recapp.etr.org/recapp/documents/programs/SSI_Adaptation_Kit.pdf)
Thank you!

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