

Intervention reduces sexual risk behavior and unintended preganancies in teen girls, study finds

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Adolescent girls participating in a sexual risk reduction (SRR) intervention study were more likely to practice abstinence and, if sexually active, showed substantial decreases in unprotected sex, number of partners, and unintended pregnancies, reports a research team led by principal investigator Dianne Morrison-Beedy, PhD, RN, WHNP-BC, FNAP, FAANP, FAAN, Senior Associate Vice President of USF Health and Dean of the College of Nursing at the University of South Florida. Results of the study demonstrate the value of risk-reduction interventions tailored to girls, who are at a greater risk for sexually transmitted infections (STIs) than boys.

The findings appear in the online article, Reducing Sexual Risk Behavior in Adolescent Girls: Results from a Randomized Controlled Trial, published August 29 in the Journal of Adolescent Health.

"While teen pregnancy has been on the decline, it still costs an estimated \$10.9 billion annually and carries an elevated risk both for the young mothers and babies. These data highlight the need for continued research into effective interventions such as our program," said Dr. Morrison-Beedy. "According to a June 2011 report from the National Campaign to Reduce Teen Pregnancy, between 1991 and 2008 there have been approximately 454,978 teen births in Florida, costing taxpayers a total of \$11.7 billion over that period in direct health and welfare support for the children and mothers, and lost revenue in part due to decreased earnings and spending."

The purpose of the study was to evaluate the effectiveness of an SSR intervention targeting low-income, urban, sexually-active teenage girls at elevated risk for HIV, STIs, and unintended pregnancies. The SSR intervention used age appropriate games and interactive group activities

to provide information, motivate and teach skills to reduce <u>sexual risk behaviors</u>. Study results demonstrated significant increases in sexual abstinence, and decreases in unprotected sex and <u>pregnancy rates</u> over the 12-month study period.

The researchers recruited 738 girls, ages 15 to 19, from several venues, including youth development centers, adolescent services and school-based centers, to participate in the <u>randomized controlled trial</u>. The participants initially attended four weekly two-hour sessions, then two 90-minute booster sessions three and six months after the initial intervention. A non-intervention control group following the same schedule and process received information on general health promotion topics such as nutrition, breast health and anger management.

The study demonstrated that a female-tailored intervention helped girls reduce their sexual risk behavior over one year. The reduction in pregnancies was especially impressive considering that the intervention did not specifically address pregnancy prevention or contraception, the researchers concluded.

"Our findings underscore the benefit of genderspecific prevention interventions for adolescent girls, yet there is more work to be done to continue refining these interventions to ensure they are feasible, appealing, and successful in reducing risky sexual behavior," said senior study author Michael P. Carey, PhD, Director of the Centers for Behavioral and Preventive Medicine at The Miriam Hospital in Providence, R.I. and Professor at Brown University.

More information:

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