SAFER SEX

Good Evidence – Risk Reduction

INTERVENTION DESCRIPTION

Target Population
- Adolescent females diagnosed with an STD

Goals of Intervention
- Prevent recurrence of STDs
- Increase condom use
- Eliminate or reduce sex risk behaviors

Brief Description

Safer Sex is an individualized skills-building intervention designed to increase condom use, reduce other risky sexual behaviors and prevent recurrent STDs among female adolescents. The 1-session intervention begins with a 7-minute video to normalize condom use. The video highlights condom types, purchasing condoms, condom negotiation, and demonstrated condom use. Each participant completes a stage of change self-assessment exercise to identify their thoughts about changing their sexual risk behaviors. A female health educator reviews the video, discusses STD transmission and abstinence, and individualizes the session, based on the participant's stage of change. Topics included imparting information about unsafe sex, risk perception, pregnancy, condoms, talking about sex, and pros and cons about condom use. Each participant can role-play condom use negotiation, if ready, and is shown how to use a female condom. Each participant is instructed in correct male condom use and allowed to practice with a penile model. Written materials about safer sex and condoms are provided. Follow-up boosters are conducted with the educator, at 1, 3, and 6 months after this initial session to discuss interim sexual behavior, review the intervention, view the video if interested, and provide condoms and written materials.

Theoretical Basis
- Social Cognitive Theory
- Transtheoretical Model of Behavioral Change
- Motivational Interviewing

Intervention Duration
- One session, over 30 minutes in length, followed by three booster sessions at 1, 3 and 6 months after randomization

Intervention Setting
- Urban children's hospital adolescent clinic and inpatient service

Deliverer
- Female health educator

Delivery Methods
- Demonstration
- Discussion
- Practice
- Printed materials
- Risk Reduction Supplies (condoms)
- Role play
- Video

INTERVENTION PACKAGE INFORMATION

The intervention package and training are available through Sociometrics under the name Safer Sex.

EVALUATION STUDY AND RESULTS

The original evaluation was conducted in Boston, Massachusetts between 1996 and 1999.

Key Intervention Effects
- Reduced number of non-main sex partners

Study Sample
The baseline study sample of 123 participants is characterized by the following:
- *49% black or African American, 18% Hispanic/Latino, 17% other, 14% white*
- *100% female*
- *Median age of 17 years, range: 14-22 years*
- *Median education of 11 years, range 7-15 years*

Recruitment Settings
Urban children's hospital adolescent clinic or inpatient service

Eligibility Criteria
Female adolescents and young adults were eligible if they were diagnosed with pelvic inflammatory disease or cervicitis, were not pregnant and did not receive treatment for an STD prior to laboratory confirmation.

Assignment Method
Participants (N = 123) were randomized to 1 of 2 groups: Safer Sex intervention (n = 60) or standard of care comparison (n = 63).

Comparison Group
The comparison group received standard care where STD education, including a discussion about STD transmission and condom use, was provided at the discretion of the treating clinician. Free condoms were offered at the end of the visit.

Relevant Outcomes Measured and Follow-up Time

- Sex behaviors (including having main and non-main sex partners in the past 6 months, condom use at last sex, frequency of condom use while having sex with main and non-main partners in the past 6 months) were measured at 1, 3, 6, and 12 months after enrollment.
- STD recurrence was measured at 12 months after enrollment.
- Given the repeated boosters at 1, 3, and 6 months after enrollment, the 3- and 6-month assessments translate to a 3-month follow-up after the previous booster; and the 12-month assessment translates to a 6-month follow-up after the complete intervention.

Participant Retention

- Safer Sex Intervention
  - 67% retained at 1 month
  - 65% retained at 3 months
  - 70% retained at 6 months (3 months after second booster)
  - 50% retained at 12 months (6 months after intervention)

- Standard Care Comparison
  - 65% retained at 1 month
  - 52% retained at 3 months
  - 76% retained at 6 months (3 months after second booster)
  - 54% retained at 12 months (6 months after intervention)

Significant Findings

- At 3 months after second booster, intervention participants were less likely than comparison participants to report having a non-main sexual partner ($p = .01$).

Considerations

- This intervention fails to meet the best-evidence criteria due to small sample sizes.
- This significant finding was shown 3 months after the initial intervention session and two of the three planned booster sessions.
- While the intervention meets Good-Evidence criteria based on the findings 3 months after the third booster, findings at other time points do not meet the criteria due to no statistically significant intervention effects on sex risk behaviors or STD recurrence, low retention rates, or small sample sizes.
- Reducing the number or type of sexual partners was not a primary outcome of interest.
- The primary relevant outcomes of interest, condom use and recurrence of STDs, were not found to be significantly different by study group at the .05 alpha level. At 6 months (a 3-month follow-up) there were slightly more intervention participants reporting condom use at last sex than comparison participants ($p = .09$). And, at 12 months (a 6-month follow-up), fewer intervention participants reported having a recurrent STD than comparison participants, although this was not statistically significant ($p = .17$).
- Although not considered as sufficient findings to meet the Good-Evidence criteria, intervention participants had greater levels of sexual risk knowledge ($p = .02$) and positive attitudes toward condoms ($p = .007$) one month after the initial session and higher positive attitudes towards condoms ($p = .007$) at 6 months (a 3-month follow-up).
- The intervention and original research targeted youth at a children's hospital, but included young adults up to 22 years old in the study sample.

REFERENCES AND CONTACT INFORMATION

Shrier, L. A., Ancheta, R., Godman, E., Chiou, V. M., Lyden, M. R., & Emans, S. J. (2001). Randomized controlled trial of a safer sex intervention for high–risk adolescent girls. *Archives of Pediatrics Adolescent Medicine, 155*, 73-79.

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