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Short-Term Evaluation of a Skill-Development Sexual Education Program for Spanish Adolescents Compared With a Well-Established Program



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ABSTRACT

Purpose: The Centers for Disease Control and Prevention highlights the importance of evaluating interventions rigorously and recommends evaluating new interventions against interventions with established efficacy. *Competencias para adolescentes con una sexualidad saludable (COMPAS)* is a school-based HIV prevention program that has been shown to be effective in reducing sexual risk behaviors among adolescents in Spain. This study evaluates the efficacy of *COMPAS* program compared with a Spanish-culture adapted version of *¡Cuídate!* (Take Care of Yourself), an evidence-based HIV prevention curriculum designed for Latino adolescents in the US.

Methods: This cluster randomized controlled trial involved 1,563 adolescents attending 18 public high schools located in 5 provinces of Spain. The schools invited to participate were enrolled and randomly assigned to the three experimental conditions: *COMPAS*, ¡*Cuídate!*, and control group (CG; no intervention).

Results: Generalized estimating equation analyses revealed that both interventions improved attitudes toward people living with human immunodeficiency syndrome (HIV)/AIDS and the HIV test and increased HIV/sexually transmitted infection knowledge and intention to engage in safer sex behaviors compared with the CG. Although only *COMPAS* increased participants' sexual risk perception and attitude toward condom use compared with the CG, the two interventions did not significantly differ on any outcome.

Conclusions: When compared with an established program, COMPAS was at least as effective at increasing the intention to engage in safer sex behaviors as the evidence-based intervention.

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IMPLICATIONS AND CONTRIBUTION

This study contributes to the development of effective human immunodeficiency syndrome prevention programs. When compared with an intervention with established efficacy, Competencias para adolescentes con una sexualidad saludable (COMPAS) was just as efficacious in promoting the intention to engage in safer sex among Spanish adolescents.

In many countries, unprotected sex is the main route of transmission of human immunodeficiency syndrome (HIV). Youth are one of the groups most affected by sexually transmitted infections (STIs) and represent 40% of HIV incidence in adults

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worldwide [1]. In Spain, where the rate of new HIV infections is above the average for the European Union [2], diagnoses for syphilis, gonorrhea, genital herpes, and venereal lymphogranuloma have increased significantly in the last 10 years [3]. The promotion of sexual health during early adolescence is an important prevention strategy for STIs and unwanted pregnancies in young people [4]. Rigorous evaluations have identified interventions that are efficacious in reducing sexual risk behavior, STIs, or HIV incidence [5,6]. The Centers for Disease Control

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and Prevention (CDC) highlighted the importance of evaluating interventions rigorously and recommends evaluating new interventions against interventions with proven efficacy [7].

In Spain, few controlled studies have evaluated the efficacy of sexual risk-reduction interventions for adolescents [8]. Some interventions have shown positive effects on cognitive factors related to safer sex, but their effects have not been evaluated against a control group (CG) and their effects after the immediate post-test measure are unknown [9,10]. These evaluations are often made with small samples from a single geographical area, making it difficult to generalize results. A review of school-based HIV prevention programs implemented in Spain [8] identified 14 studies and concluded that only one, *Competencias para adolescentes con una sexualidad saludable (COMPAS*; competencies for adolescents with a healthy sexuality), met all the quality criteria: it is based on an accepted theoretical model, contains more than 4 hours of content, uses participatory activities, and was evaluated using a CG and follow-up assessments.

COMPAS is a personal-competency improvement program applied to promoting sexual health that includes informative, motivational, and behavioral components. In a controlled study of 832 students aged 15–18 years recruited at 15 public high schools in five provinces in Spain, COMPAS increased HIV knowledge and intention to practice safer sex and improved attitudes toward using condoms despite obstacles, people living with HIV/AIDS, and HIV testing compared with a CG [11]. In addition, COMPAS's efficacy did not differ depending on whether it was implemented by a health-promotion expert or a health-promotion expert and a peer [12].

The objective of this study was to examine the immediate effects of *COMPAS* on adolescents' HIV/STI knowledge, attitudes toward condom use, perceived norms, self-efficacy, sexual risk perception, and intentions for safer sexual behavior compared with ¡*Cuídate!* (Take Care of Yourself) [13] and a CG. ¡*Cuídate!* is the adaptation for Latino adolescents of the *Be proud! Be responsible* program [14] and according to the CDC classification [7], the only high-quality program in the United States found to be efficacious in reducing sexual risk behaviors in Spanish-speaking adolescents. In addition, its main components and underlying theoretical basis are similar to those of *COMPAS* [15,16].

The study used a cluster randomized controlled trial in which public high schools were randomized to *COMPAS*, a Spanish-culture adapted version of ¡*Cuídate!*, or a CG. A cluster randomized controlled trial design was used to reduce the likelihood of contamination among conditions. The article reports the efficacy of *COMPAS* in causing positive changes in theoretical constructs immediately after intervention compared with ¡*Cuídate!* and the CG. We hypothesized that *COMPAS* would be at least as effective as ¡*Cuídate!* in causing favorable changes on the theoretical constructs compared with the CG.

Methods

Participants

This cluster randomized controlled trial was conducted in 2012. The participants were 1,563 students from 18 public high schools in five provinces in the north, south, east, and southeast of Spain enrolled in the 9th and 10th grades of Compulsory Secondary Education or equivalent grade (aged 14–16 years). The sample size for each province was 300 participants: 100 students per experimental condition (*COMPAS*, ¡*Cuídate!*, and no-

intervention CG). The students volunteered to participate and, as an incentive, those completing both evaluations were entered into a drawing for €30 gift vouchers.

Interventions

Table 1 provides the objectives, structure, content, and procedures involved in the two interventions.

Based on the Information-Motivation-Behavioral model [17] and the Social Learning Theory [18,19], COMPAS is a program of five 50-minute sessions aimed to promote healthy sexual behaviors and reduce sexual risk in adolescents. The Information-Motivation-Behavioral model suggests that people are more likely to protect themselves from HIV if they are well informed about sexual risks, are highly motivated to protect themselves from STI, and possess the skills to practice safer sex. According to the Social Learning Theory, skills to engage in safer sex and the ability to use these skills are required to achieve behavioral change; information is needed, but not sufficient to change behavior. The main components of COMPAS are transmission of information, social skills training, problem-solving training, and strategies to maintain safer sexual behavior.

¡Cuídate! is a cultural-based curriculum developed to reduce sexual risk among Latino adolescents in the United States that has been selected as the "best-evidence" HIV risk-reduction intervention by the CDC [15]. It was based on Be Proud! Be Responsible! [14], an intervention targeted to African-American adolescents, evaluated in a series of randomized controlled trials in Philadelphia, PA and NJ [20–22]. ¡Cuídate! consists of six 45-minute modules incorporating such cultural values of Latino culture as the importance of the family and gender-role expectations. The underlying theoretical models are the Social Cognitive Theory and the theories of Reasoned Action and Planned Behavior [15,16,19]. The principal goals of the program are to influence attitudes, behavioral and normative beliefs, self-efficacy, and negotiation skills regarding HIV risk-reduction behaviors, specifically abstinence and condom use. Several articles describe in detail this intervention and support its effectiveness in reducing the number of sexual partners and unprotected sex and increasing condom use [23-25] for both English-speaking and Spanish-speaking Latino adolescents.

Procedure

The ethics committee for research of the Miguel Hernández University approved the study. The process of culturally adapting ¡Cuídate! involved several phases. Some content was eliminated because it was specific to Latino adolescents from the United States. Other content, vocabulary, and Latino expressions were adapted to Spanish culture, addressing cultural differences while respecting the main components that underlie the essence of the program, using three focus groups: experts in reducing sexual risk in adolescents, postgraduate psychology students, and Spanish adolescents. The ¡Cuídate! videos were not used because the context, music, and vocabulary were inappropriate for Spain and the US inner-city actors were not similar to Spanish adolescents, our target population. Once ¡Cuídate! was adapted, both interventions were pilot tested with a group of 20 summer school students aged 13–18 years. Through this pilot implementation, it was possible to identify the aspects the interventions that could be improved with respect to comprehension and appropriateness.

Schools that had not implemented HIV/AIDS activities in the preceding academic term were eligible to participate. Eighteen of

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