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Beyond the Effects of Comprehensive Sexuality Education: The Significant Prospective Effects of Youth Assets on Contraceptive Behaviors

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A B S T R A C T

Purpose: The purpose of the study was to prospectively determine if youth assets were significantly associated with contraception use after accounting for the effects of youths' exposure to comprehensive sexuality education programming.

Methods: Prospective associations between youth asset scores, comprehensive sexuality education topics received, type of contraceptive used, and consistent contraceptive use were analyzed using multinomial and binomial logistic regression in a sample of 757 sexually active youth.

Results: Higher youth asset scores were associated with condom use (adjusted odds ratio [AOR] = 1.51, 95% CI = 1.01–2.28), hormonal birth control use (AOR = 2.71, 95% CI = 1.69–4.35), dual method use (AOR = 2.35, 95% CI = 1.44–3.82), and consistent contraceptive use (AOR = 1.97, 95% CI = 1.38–2.82). After controlling for youths' experience with comprehensive sexuality education, higher youth asset scores remained a significant predictor of hormonal birth control use (AOR = 2.09, 95% CI = 1.28–3.42), dual method use (AOR = 2.58, 95% CI = 1.61–4.15), and consistent contraceptive use (AOR = 1.95, 95% CI = 1.36–2.80).

Conclusions: Youth serving organizations that are interested in preventing teen pregnancy should consider widespread implementation of evidence-based youth development programs that focus on building and strengthening specific youth assets.

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IMPLICATIONS AND CONTRIBUTION

Public health practitioners should consider widespread implementation of youth programs that develop and strengthen specific youth assets with the goal of increasing contraceptive use and reducing teen pregnancy.

Conflicts of Interest: The authors have no conflicts of interest to disclose.

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Teen pregnancy has declined in the U.S. over the past 3 decades. Teen pregnancy rates peaked in 1990, with 117.6 pregnancies per 1,000 teens (aged 15–19 years) [1]. The 2011 rate, which is 52.4 pregnancies per 1,000 teens, illustrates the continued downturn of teen pregnancy [1]. However, despite the decline, the rates are still very high for U.S. black (93 pregnancies per 1,000 teens) and Hispanic teens

(74 pregnancies per 1,000 teens), and the overall U.S. rate is the highest among 21 countries with complete data [1,2]. Researchers largely attribute the decline in the teen pregnancy rate to improvements in teens' contraception behavior rather than to delays in initiation of sexual intercourse [3,4].

Contraceptive behaviors among teens aged 15–19 years have evolved over the years. Declines in the teen pregnancy rate have been linked to moderate increases in the use of hormonal birth control, long-acting reversible contraceptives, and dual method use (the simultaneous use of a condom plus another modern method of contraception) [3,5]. These improvements are notable as hormonal birth control and dual method use have been found to be more effective in reducing pregnancies than condom use alone [6]. The identification of factors that predict contraceptive behavior has been more difficult.

Changes in contraceptive behavior have been attributed to fluctuations in the national economy, changing childbearing norms, availability of online sexuality and reproductive health information, and clinical recommendations from medical groups that make hormonal contraception more accessible to teens [3,4,7,8]. In addition, comprehensive sexuality education and youth development programs that focused on strengthening "youth assets" have been shown to have an impact on youths' contraceptive behavior [9–12].

Comprehensive sexuality education programs can positively influence teen contraceptive behaviors [9–11]. Reviews of teen pregnancy prevention programs from the Office of Adolescent Health and Manlove et al. [10] identified evidenced-based teen pregnancy prevention programs that impacted recent condom or contraceptive use and contraceptive consistency [11].

Despite the evidence supporting the effectiveness of comprehensive sexuality education programs in changing contraceptive behaviors, program implementation varies widely and remains controversial [13,14]. Currently, fewer than half ($n = 24$) of states require sexuality education programming and just 18 states require that information on contraception be provided in schools [14]. Recent national data reflect the downward trend in the implementation of sexuality education programming as fewer teens are receiving formal sexuality education in a school, church, or a community center setting than in the past [15]. Between 2006–2010 and 2011–2013, significantly fewer ($p < .05$) adolescent females reported receiving formal education regarding birth control (70% vs. 60%), saying no to sex (89% vs. 82%), sexually transmitted diseases (94% vs. 90%), and HIV/AIDS (89% vs. 86%) [15]. Similarly, significantly fewer ($p < .05$) males report receiving formal education regarding methods of birth control than in the past (61% vs. 55%) [15].

As the implementation of sexuality education programming declines and remains contentious, the continued identification of additional approaches that have an impact on youth contraceptive behaviors is critical if the field is to continue experiencing declines in the teen pregnancy rate. Youth development programs that focus on strengthening youth assets may be one such approach.

More holistic than traditional comprehensive sexuality education programs, effective youth development programs aim to prepare youth for adult life by providing opportunities and experiences that promote prosocial bonding and build cognitive, social, behavioral, and emotional competencies [16–18]. Youth development programs attempt to reduce risky sexual behaviors by strengthening "youth assets." Youth assets are community, family, and individual factors that help youth avoid risk

behaviors and increase the likelihood that they will successfully transition into adulthood [19]. Youth asset interventions can reduce youth participation in risky sexual behavior, and they lack the sexuality and reproductive health content typically found in comprehensive sexuality education programming and which some communities find controversial [17]. Research has shown that assets have a positive impact on youth sexual behaviors including delaying sexual initiation, pregnancy, and increasing birth control use [20–24]. For example, results from a longitudinal study indicate that some youth assets, such as aspirations for the future, self-confidence, peer, and nonparent adult role models and the ability to make responsible choices, increased the odds of birth control use (ranging from a 22% to 42% increase in odds) [20].

Youth development programs that focus on improving youth assets can impact youth sexual and contraceptive behaviors; and pregnancy and birth outcomes [10–12,16,17]. Recent reviews from the Office of Adolescent Health, Manlove et al., and Gavin et al. identified 17 youth development programs that impacted at least one reproductive health outcome. Although at least some of these programs address reproductive health topics, there is evidence to suggest youth development programs that do not include controversial sexuality education topics can still affect youth contraceptive behaviors [17]. For example, Raising Healthy Children is a multiyear social development program aimed at promoting bonding to school and peers by providing opportunities to strengthen youths' social competencies [25]. By age 21 years, African-American participants in the study ($n = 349$, 51% male, mean age = 10.8 years at baseline, 47% African-American) reported more frequent condom use than their single non-African-American peers in the comparison group [25]. Notably, these outcomes were achieved using a youth asset focus rather than sexuality education. Additional research is needed to determine the impact that youth assets can have on contraceptive behaviors in the absence of reproductive health content.

Despite the availability of youth development programs and the many organizations serving youth, relatively few are implementing evidenced-based youth development programs [26]. Additionally, few studies have examined the impact of the core constructs of youth development programs including youth assets such as peer, school, and community connectedness; parental monitoring; and aspirations for the future, on reproductive outcomes [26].

In summary, comprehensive sexuality education and youth development programs have been successful in improving teen contraceptive behaviors. Comprehensive sexuality education programs remain controversial in conservative communities and their implementation is in decline. Regrettably, despite their apparent effectiveness, evidence-based youth development programs that focus on assets have yet to be widely implemented in the teen pregnancy prevention field [13,26,27]. Youth development programs may be an acceptable alternative for communities that are not ready to implement comprehensive sexuality education and could lead to even further declines in teen pregnancy rates in those communities that do.

Data collected in the present study present a unique opportunity to prospectively evaluate the effect of youth assets on contraceptive use behavior of youth after statistically controlling for the effects of the youths' exposure to comprehensive sexuality education programming. The purpose of this is to determine if youth who possess multiple youth assets were significantly more likely to report a reliable contraception method or

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