

Reproductive Health Counseling for Young Men

Overview

Reproductive Health Counseling for Young Men is a clinic-based intervention which was designed to increase men's knowledge of reproductive health including contraceptive use through the use of a video presentation followed by one-on-one reproductive health counseling. The intervention was designed for high school age boys.

The intervention was first implemented and evaluation in the Northwest Region of the United States with young men whose families were enrolled in the Northwest Region Kaiser Permanente Health Maintenance Organization (HMO). The results of the evaluation, conducted 12 months after the intervention, indicate that the young men who received the intervention were significantly more likely than the young men in the control group to have had a partner who used the pill at last sex. This was particularly true for those who initiated intercourse during the follow-up period.

Program Description

Originally developed for boys between 15 and 18 years of age, this is a one-hour, single-session, clinic-based intervention. The program is designed to meet the needs of sexually active and inactive teens, and to promote abstinence as well as contraception.

Population Served

This intervention serves young men who are in high school (between ages of 15 and 18).

Settings and Goal

The intervention is a clinic-based intervention that is appropriate in a variety of clinic and hospital settings. The goal of the program is to promote abstinence as well as effective contraceptive use.

Type of Intervention

Reproductive Health Counseling for Young Men is a video intervention followed by an individual counseling consultation. The session begins with a video presentation that is viewed privately by each teen. The materials address reproductive anatomy, fertility, hernia, testicular self-examination, STDs (including HIV/AIDS), contraception (including abstinence), communication skills, and access to health services. A half-hour private consultation with a health care practitioner follows the presentation.

Guided by the young men's interests, the consultation may include such topics as sexuality, fertility goals, and reproductive health risks, along with rehearsal and modeling of sexual communication. The video and counseling intervention was based on a "developmental" counseling approach that considered the psychosocial characteristics of adolescence.

The intervention aims to emphasize highly explicit, directive advice during the counseling session. In addition, the counseling session includes samples of condoms and other birth control methods as references during the session. The references to samples and the approach used in the session were designed to increase the young men's comfort level with sexual and contraceptive topics with the goal of facilitating communication about contraception between partners.

Operation/Logistics

Length of Intervention: The intervention is one hour in length, evenly divided between the counseling session and video presentation.

Size of Intervention: The intervention was evaluated with a sample of 1,195 high school-aged males visiting health maintenance organizations in two Northwestern cities.

Components of Intervention: The intervention includes a video presentation.

Staffing Requirements: Health care practitioners serve as counselors and provide a brief introduction to the video presentation. In the field study, special training was held to introduce staff to the program's "developmental counseling" strategies, as well as to review the video presentation. Throughout the study, one of the program leaders was available to answer questions and lead occasional staff meetings.

Evaluation

Type

The evaluation was a randomized control trial that included 1,195 adolescent boys aged 15 to 18. Approximately 91% of the sample was white, 5% was African-American, 4% was Asian, and 1% identified as another race. Two instruments were used in data collection, a baseline survey which was administered upon entry into the study, and a follow-up questionnaire which was administered approximately one year later.

Findings

Compared to a control group of their peers, sexually active program participants were significantly more likely to use effective contraception at the one-year follow-up assessment, especially if they were not yet sexually active at the time of the intervention. Controlling for background characteristics, the association between the intervention and contraceptive effectiveness was statistically significant for all (odds ratio of 1.51, $p < 0.05$). In addition, there was a stronger association between the intervention and contraceptive effectiveness for young men in the intervention group who were not sexually experienced at the beginning of the study (odds ratio 2.53, $p < 0.01$).

Sexually active female partners of program participants were also more likely to use effective contraception (the pill) at the follow-up (odds ratio 1.66, $p < 0.05$). The intervention was also found to have a positive effect on sexual impatience which was built from several attitudinal statements referring to status as a virgin, desire to have sex in the near future, etc. Among virgins at baseline, sexual impatience was the strongest indicator of intention to have unprotected sex (an odds ratio of 1.39, $p < 0.001$). The young men exposed to the intervention were found to have lower sexual impatience than the controls (an odds ratio of 0.64, $p < 0.01$). Thus, the authors conclude that the intervention reduced sexual impatience among virgins in the intervention group.

Evaluator Viewpoints

The evaluators suggest that one way the intervention could have increased contraceptive use is by increasing the young men's understanding of various methods of contraception, especially the pill. The evaluation found that young men in the intervention group were more likely to indicate that they believed the pill was safe compared to those in the control group.

Further Information

This program is available through PASHA and more information can be found at <http://www.socio.com/srch/summary/pasha/full/paspp08.htm>

Resources

Danielson, R., Marcy, S., Plunkett, A., Wiest, W., and Greenlick, M.R. (1990). Reproductive Health Counseling for Young Men: What Does it Do? *Family Planning Perspectives*, 22(3): 115-121.