

Sexuality and the self: studying gender-, social- and cultural differences in sexual self-concept as an explanation for unplanned pregnancies and abortion in teenagers

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Ethical review	Approved WMO
Status	Recruitment stopped
Health condition type	Lifestyle issues
Study type	Interventional

Summary

ID

NL-OMON30512

Source

ToetsingOnline

Brief title

The sexual self-concept of adolescents

Condition

- Lifestyle issues

Synonym

contraceptive behavior, sexual behavior

Research involving

Human

Sponsors and support

Primary sponsor: Universiteit Utrecht

Source(s) of monetary or material Support: ZonMw

Intervention

Keyword: prevention, self-concept, sexuality, teenagers

Outcome measures

Primary outcome

The effectiveness of the intervention is determined by identifying more positive attitudes, social standards, self-efficacy, intention and / or behaviors in the area of safe sex.

Secondary outcome

The sexual self-concept of adolescents.

Study description

Background summary

In the Netherlands, annually 1 on each 100 teenage girls (15-19 years) has an abortion and 15% of the total number of abortions that are carried out take place among women younger than twenty years. These percentages and numbers have recently increased. The most important explanation for this recent development seems to be the absolute and relative increase of risk groups affected by unplanned pregnancies, particularly ethnic minority women and girls. Minority young people do not often use contraceptives, or use them inadequately. Safe sex education for young people should be adapted to how adolescents experience sexuality. The way individuals experience sexuality depends on their sexual development, but also on their gender and culture. These factors are apparent in the sexual self-concept of adolescents. Many young people engage in sexual behaviour without having a clear and unambiguous sexual self-concept. This hampers the preparation of contraceptive behavior and increases the risk of unplanned pregnancies. It is plausible that minority young women have a less clear sexual self-concept, because of a stronger taboo on sexuality in some cultures

Study objective

Aim of the research is the development and evaluation of an intervention to promote the sexual and reproductive health of adolescents who differ in cultural background. Fundamental idea is that sex education is more effective if the information is tailored to the sexual self-concept and situation of adolescents. The intervention is therefore developed as online instrument, in which the sex education message is tailored to the sexual self-concept and situation of the respondent. Moreover, respondents will receive also information concerning suitable strategies which should help them to enact this safe sex behavior.

Study design

The research, in the form of an RCT, will test if information that is tailored to characteristics of the individual respondent (among which the sexual self-concept) is more effective than a non-tailored message. To test the intervention, a 2 x 2 research design has been developed. At random it is decided whether adolescents do or do not receive feedback about the possible influence of their sexual self-concept on safe sex behavior, and whether adolescents will or will not be offered appropriate strategies for actually enacting safe sex behaviors. The impact of the intervention is assessed by means of assessment of differences in social cognitive aspects of safe sex behavior (attitude, social norm, intention and self-efficacy). After several weeks, a follow-up will take place to also examine the effect on adolescents actual safe sex behavior.

Intervention

Findings from previous research conducted as part of this project provided some clear points of departure for the development of an intervention to promote the sexual and reproductive health of adolescents from diverse ethnic backgrounds. The fundamental idea on which the intervention rests is that information is more effective if it is adapted to the sexual self-concept of adolescents. During the intervention, adolescents are stimulated to practice safe sex in a manner that is optimally tailored to their own experiences and cultural background. Moreover, adolescents are stimulated to clarify their own aims and plans in the area of sexuality. This way, we hope to improve the prevention of unplanned pregnancies, by adapting sex education to the individual needs of adolescents from differing backgrounds

Study burden and risks

Completing the intervention will take approximately 45 minutes up to an hour. When adolescents also indicate that they want to participate in follow-up research, this will involve one half hour of extra time. Participating in the

intervention entails a minimal burden and is without risk, in particular in view of the importance of reducing unplanned pregnancies and abortions among adolescents. Participation is entirely voluntary and respondents can only take part after consent has been obtained from their parents./guardians. Furthermore, the respondent can stop participation at any time. When a respondent drops out of the study, data will not be stored.

Contacts

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Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age

Adolescents (12-15 years)
Adolescents (16-17 years)
Adults (18-64 years)
Elderly (65 years and older)

Inclusion criteria

males and females of different ethnical backgrounds and educational levels aged 12 to 19 years

Exclusion criteria

youth younger than 12 years or older than 19 years

Study design

Design

Study type:	Interventional
Intervention model:	Other
Allocation:	Randomized controlled trial
Masking:	Open (masking not used)

Primary purpose: Prevention

Recruitment

NL	
Recruitment status:	Recruitment stopped
Start date (anticipated):	01-04-2008
Enrollment:	2000
Type:	Actual

Ethics review

Approved WMO	
Date:	11-09-2007
Application type:	First submission
Review commission:	METC Universitair Medisch Centrum Utrecht (Utrecht)

Study registrations

Followed up by the following (possibly more current) registration

No registrations found.

Other (possibly less up-to-date) registrations in this register

No registrations found.

In other registers

Register	ID
CCMO	NL11861.041.07