

# Sex under the age of 25 in residential youth care

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<b>Ethical review</b>	Approved WMO
<b>Status</b>	Pending
<b>Health condition type</b>	Other condition
<b>Study type</b>	Observational non invasive

## Summary

### ID

NL-OMON49699

### Source

ToetsingOnline

### Brief title

S25ryc2019

### Condition

- Other condition
- Economic and housing issues

### Synonym

sexual health, sexuality

### Health condition

seksuele gezondheid

### Research involving

Human

## Sponsors and support

**Primary sponsor:** Stichting Primrose

**Source(s) of monetary or material Support:** Stichting Primrose

## Intervention

**Keyword:** residential, sexual health, youth care

## Outcome measures

### Primary outcome

The results of this study will be analyzed and described in a concept report.

After feedback of the involved stakeholders the report will be finalized.

### Secondary outcome

The results of the study will directly be linked to practical tips for youth care professionals. By linking results and practice knowledge is connected to practice which guarantees continuum in the guideline for sexual development of young people in residential youth care. Recommendations for interventions, policy and future research that result from discussing the study results with stakeholders will be converted into a plan for action.

## Study description

### Background summary

Sex under the age of 25 is a large representative study done by Soa Aids Nederland and Rutgers in 2005, 2012 and 2017 regarding the sexual health of young people aged 12 to 25 years living in the Netherlands. These studies resulted in rich datasets with information leading to a clear perspective on sexual health among young Dutch people. However, specific subgroups of young people were not included in these studies because of the used recruitment methods (through secondary schools and the National population register). It is concerning that young people living in residential youth care were not included in the Sex under the age of 25 studies because they seem more vulnerable for

sexual risks and problematic sexual behavior. It has previously been shown that young people living in residential youth care have relatively more experience with sexual violence or family circumstances in which sexual development is not supported. These and other factors result in the fact that young people living in residential youth care experience more difficulties in having equal relationships or in making healthy sexual choices. Several interventions were developed specifically to support professional working with young people that live in residential youth care because of their increased vulnerability for sexual risks and problematic sexual behavior. However, research into sexual health of these young people is lacking in the Netherlands. Existing interventions are therefore based on studies among groups of young people that are often living in residential youthcare, such as young people with mental disorders or autism. The role of living in residential youth care on the sexual health of these young people remains unknown.

## **Study objective**

This study results in new insights into the sexual health of young people aged 16 to 25 years living in residential youth care. These insights can be used to improve interventions regarding sexual health that are used by professionals who work with these young people.

## **Study design**

Sex under the age of 25 years in residential youth care is a cross-sectional participative action study.

Participation in research stimulates all stakeholders involved, increases ownership of knowledge and commitment to future improvements to daily practice. In the current study relevant stakeholders, like treatment coordinators, professionals with specific focus on sexual health, researchers, policy makers and managers, are included. They are involved in the design of the study, in pretesting the questionnaire, in recruitment of participants and in translating results into recommendations for daily practice and policy.

Prior to this study we have assessed the support and feasibility for this study among relevant stakeholders. Points for attentions and possible obstacles in executing this study were assessed. Multiple youth care institutions confirmed the importance of this study and were prepared to participate. Prior to customizing the questionnaire for the young people living in residential youth care and prior to data collection we will visit several youth care institutions. The aim of these visits is to familiarize ourselves with this target group and with youth care institutions. During these visits we will mainly familiarized ourselves with the institutions and the young people living there. Additionally, an interview was held with one or more youth care professionals about their needs and logistic challenges with regard to the

study for their institution.

For this study we need to customize research instruments to the abilities and disabilities of the young people living in residential youth care. Previously we have studied Sex under the age of 25 years among young people at secondary special education. Cluster 4 schools educate students with severe behavioral problems or psychiatric problems, problems related to the problems of young people living in residential youth care. The questionnaire for this study will largely originate from the questionnaire used in Cluster 4 of the secondary special education schools.

The questionnaires that will be customized for young people in residential youth care will be made suitable for young people with an IQ of 55 and higher in terms of content and language. Young people with an IQ above 80 complete the full questionnaire, while the young people with an IQ between 55 and 80 will only complete a selection of the questions, in accordance with the PRO questionnaire from the Cluster 4 group.

In selecting questions for the questionnaire we also need to take into account that the sample is smaller than the regular Sex under the age of 25 years. Therefore, questions that only concern small subgroups (for example young gay people) will not be included because they will not result in meaningful outcomes. Themes that will be included will be (online/offline) sexual behavior, sexual experience, protection against pregnancy and STI, crossing of sexual boundaries, knowledge, information requirement and use of social media (including sexting). The questionnaire will be pretested among 20 young people. In this pretest the questionnaire will be completed by the young people and afterwards they will discuss their experiences in completing the questionnaire with researchers.

## **Study burden and risks**

The included young people need to complete a questionnaire. The young people can have questions or develop some insecurities after completing the questionnaire. They also might have negative experiences with sexuality possibly making them feel confronted by the questionnaire.

The burden of completing the questionnaire is minimized by letting the institution make a selection of who can and cannot participate. If the burden is thought to be too high because of sexual trauma or severe psychiatric problems, young people are excluded.

It might be possible that someone unexpectedly has an emotional reaction caused by the questionnaire. Therefore, good healthcare after completing the questionnaire needs to be available. Questionnaire supervisors (researchers or ambassadors) will be trained how to deal with potential emotional responses during completion of the questionnaire. Additionally, data collection will only be done if the confidant of the department of the youth care institution is available. If any of the young people need support they can immediately go to

the confidant.

## Contacts

### **Public**

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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**

- youth aged between 16 and 25 years
- living in youth care

### **Exclusion criteria**

The youth care institution will assess per young person whether he/she can participate.

Exclusion if:

- young people have a sexual trauma which actively influences daily functioning of this person.
- young people with severe psychiatric problems that directly influence capacity to complete the questionnaire, or disable honestly answering the questions in the questionnaire.
- Young people with an IQ below 55 will be excluded because of the possibility that they might not understand the questions based on lack of language skills or content.

## Study design

### Design

**Study type:** Observational non invasive

Masking: Open (masking not used)

Control: Uncontrolled

Primary purpose: Prevention

### Recruitment

NL

Recruitment status: Pending

Start date (anticipated): 02-09-2019

Enrollment: 900

Type: Anticipated

## Ethics review

Approved WMO

Date: 04-09-2019

Application type: First submission

Review commission: METC Universitair Medisch Centrum Utrecht (Utrecht)

Approved WMO

Date: 22-11-2019

Application type: Amendment

Review commission:	METC Universitair Medisch Centrum Utrecht (Utrecht)
Approved WMO	
Date:	23-12-2019
Application type:	Amendment
Review commission:	METC Universitair Medisch Centrum Utrecht (Utrecht)
Approved WMO	
Date:	02-01-2020
Application type:	Amendment
Review commission:	METC Universitair Medisch Centrum Utrecht (Utrecht)
Approved WMO	
Date:	03-01-2020
Application type:	Amendment
Review commission:	METC Universitair Medisch Centrum Utrecht (Utrecht)
Approved WMO	
Date:	15-01-2020
Application type:	Amendment
Review commission:	METC Universitair Medisch Centrum Utrecht (Utrecht)
Approved WMO	
Date:	24-02-2020
Application type:	Amendment
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**

CCMO

**ID**

NL69659.041.19