Organizational Use of a Media Campaign Booklet to Encourage Parent-Child Communication about Waiting to Have Sex

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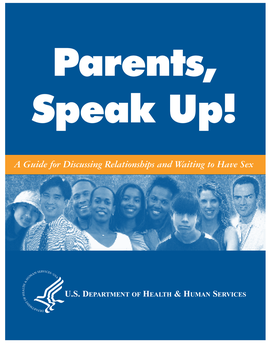
1. Introduction

- Early initiation of sex is associated with numerous risk factors for teens, including increased number of partners (O'Donnell, O'Donnell & Stueve, 2001) or testing positive for sexually transmitted infections (Kaestle, Halpern, Miller & Ford, 2005)
- Parent-child communication about sex protects against early sexual initiation (Dilorio et al., 2003)
- Health communication is a potential strategy to promote parent-child communication about sexual risk behavior (DuRant et al., 2006; Evans et al., 2009)
  - Research is limited regarding media campaign evaluations targeting parent-child communication to affect teen sexual activity and efficacy of print materials as part of media campaigns to impact parent-child communication about sex and parenting behaviors
- Disseminating print materials often part of health communication campaigns
  - Benefits include reaching large audiences with well-designed, easy to read generic materials (Kreuter et al., 1999) and hard-to-reach populations with low-cost materials (Campo et al., 2008); using electronic means (Noia et al., 2003)
  - Drawbacks of broadly focused campaigns include overlooking social, economic, and environmental factors among various audiences, e.g., reading level for less-educated groups (Marcus et al., 1998)

2. Parents Speak Up National Campaign

- The U.S. Department of Health and Human Services's (USDHHS) Office of Population Affairs (OPA) launched the Parents Speak Up National Campaign (PSUNC) in June 2007
- PSUNC was designed to encourage parents to talk early and often with their children about waiting to have sex, and consisted of paid and unpaid television, radio, print, and outdoor advertisements (primarily Public Service Announcements), a Web site (www.4parents.gov) and associated parent and teen guides
- The PSUNC booklet (Figure 1) for parents provides information about:
  - how to talk with child about waiting to have sex and perceived barriers to talking
  - accuracy of social norms among teens
  - parent-child relationship quality and setting goals for the future
  - establishing rules and expectations about dating and sex
  - characteristics of healthy relationships
  - refusal skills
  - consequences of teen sexual activity
  - special topics (e.g., what to do if teen has already had sex, pregnancy, contraception, and legal issues)

Figure 1. PSUNC booklet cover page



3. Objectives

- Examine the differences between types of organizations in how they used the PSUNC booklet
- Identify characteristics of the booklet that should remain the same or be changed in order to make it more helpful to parents
- Determine suggestions for ways to disseminate the booklet and identify characteristics and contextual factors that hindered dissemination of the booklet

4. Methods

Participants

- The OPA Clearinghouse provided contact information for organizations that had ever ordered the PSUNC booklet
  - Organizations were selected based on quantity of booklets ordered (≥100) and geographic distribution
- RTI collected information from staff representing 26 organizations (Figure 2)
  - Organizations were located around the country and served a wide range of populations (Figure 3)
- Staff member was identified who had familiarity with the booklet or who was responsible for ordering/distributing print materials about teen reproductive health
- Participating staff members held varied roles within their respective organizations (Figure 4)

Figure 2. Number of Organizations

Type of Organization	Number Represented
PSUNC outreach centers	3
Education-oriented	5
Community-based	9
Health care	9
TOTAL	26

Figure 3. Map of Organizations

Figure 4. Staff Roles Across Organizations

	Staff Role					
Type of Organization	Director	Health educator	Nursing/ medical staff	Project coordinator	Communi-cations specialist	TOTAL
PSUNC outreach centers	3	0	0	0	0	**3**
Education-oriented organizations	2	0	1	1	1	**5**
Community-based organizations	5	1	1	2	0	**9**
Health care organizations	4	3	2	0	0	**9**
TOTAL	**14**	**4**	**4**	**3**	**1**	**26**

Procedures

- Data collection took place between November 2008 and February 2009
- RTI conducted 23 qualitative one-on-one telephone interviews and collected information via e-mail from three staff
- Interview questions asked about:
  - Descriptions of the staff, organizations, and population served
  - Ways in which the PSUNC booklet has been used
  - Staff feedback about the booklet (including success of activities using the booklet, most/least useful portions of the booklet, etc.)
  - Staff ideas about distribution of the booklet (i.e., make it available on Web, incorporate in existing programs in the community)
- RTI took notes during interviews

5. Analytic Strategy

- Agreed as a group on a way of initially classifying themes regarding organizational approaches to using booklet and suggestions for utilizing and disseminating booklet
- Two team members re-read all notes and coded any statements that fit under these classifications
- New categories added as needed, using the constant comparative method
- Any discrepancies resolved by consensus
- When coding was complete, third team member reviewed to validate coding
- Counts were taken of how many interviews in which each type of theme was mentioned

6. Results

- Organizations used the PSUNC booklet in multiple ways (Figure 5)
  - Almost all organizations reported that they directly handed out the booklet to parents

Figure 5. Use of Booklet (Counts Taken)

	Use/Distribution of booklet			
Type of organization	Walk through with parents	Hand out directly to parents	Passively distribute to parents (e.g., on booth tables at events or in doctors' offices)	Provide booklet to other organizations to distribute
PSUNC outreach centers	3	3	2	3
Education-oriented organizations	1	4	5	2
Community-based organizations	5	8	3	2
Health care organizations	1	7	6	5
TOTAL	**10**	**22**	**16**	**12**

- Feedback generally very positive from staff
  - Booklet fit well with organizational goals and activities
  - Important that booklets are free and available in Spanish
  - Liked content, especially tips for talking with teens, acronyms, and STD information
  - Generally thought booklet flowed well, was easy to read, and found boxed information and pictures appealing
- Most staff had suggestions for additions to the booklet, but few recommended removing content (Figure 6)
  - Add information on media use and Internet safety and personal stories from parents
  - Tailor booklet to more diverse populations/teen experiences
  - More accurate and/or complete information on contraception/ pregnancy, STDs, and teen development
- Many had recommendations for usability of booklet [Simplify text and use fewer words, lower reading level, improve formatting, reorganize to make information easier to find, and insert table of contents]
  - Make overall appearance more visually appealing, improve color scheme, and make pictures more broadly appropriate

Figure 6. Content to Change/Enhance or Add (Counts Taken)

Type of organization	Contra-ception/ pregnancy	Tailoring	STDs (types, protection, testing)	Teen develop-ment	Media use and Internet safety	Personal stories/ mistakes & testimonials from parents
PSUNC outreach centers	0	3	0	0	1	1
Education-oriented organizations	1	1	0	1	0	0
Community-based organizations	2	1	1	1	1	1
Health organizations	3	1	3	1	0	0
TOTAL	**6**	**6**	**4**	**3**	**2**	**2**

- Staff had suggestions for disseminating the booklet
  - Web (promote on campaign commercials, other Web sites, radio, etc.), although some organizations expressed concern that access to the Internet isn't readily available to the population they serve
  - Provide to organizations serving parents (doctors' offices, schools, family services departments, faith-based orgs/churches, health fairs, libraries, grocery stores)
  - Direct mailings should come from schools or another organization the parent has a relationship with
  - Booklet will be used more if it can be incorporated into a discussion (one-on-one with person handing them out or in a group setting)

7. Discussion

- Booklet was used in a variety of ways by many types of organizations
  - Generalized booklet reached large audiences
  - Having booklet available at no cost to parents was a great asset
- Booklet can be improved in some ways and disseminated differently to have more impact
  - Enhance and/or add to existing content and improve format, organization, and appearance to increase use among staff and parents
  - Need for electronic dissemination of booklet but lack of Internet access in some populations creates a challenge
- Need for evaluation of this tool and social marketing materials in general
  - Lack of knowledge regarding what approaches enhanced parental use of booklet
- This study is unique in that it examined the use of a booklet in a national campaign among a nationwide convenience sample of organizations

8. Limitations

- Small convenience sample
- All data are self-reported; possible social desirability bias
- Some staff had no or little experience using the booklet
- Some organizations had not used the booklet for two years or more, so possible recall bias
- Organizations rarely collected formal parent feedback or tracked parental use of the booklet

9. Implications

- Contribution to field of reproductive health campaigns with parent component and print materials
- A better understanding of how print materials are utilized as part of media campaigns can improve their usefulness and potential influence on health behaviors
- Utility of formative research in informing changes to materials that may make them easier to use/disseminate
- Future plans for booklet
  - Results currently being incorporated into revised booklet and parent feedback about revised booklet will be collected
  - Federal funding of this effort may contribute to further dissemination of this booklet to increase use and effects of booklet

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