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changes related to the use of the software program.

Implications for Practitioners

Do You, Do Me, Do Condoms offers health care providers a culturally competent, cost-efficient, and reliable tool to address issues surrounding condom use for

African American adolescents. This software helps remove barriers found in traditional counseling sessions and provides an intervention that is consistent for every user.

For more information, contact Leslie Moore or Brenda Johnson, Department of Community Health, 121 Huff Hall, Champaign, IL 61820; phone: (217) 333-2307.

Program: Clinic-Based Adolescent Pregnancy Prevention Project

Sponsor: National Institute of Child Health and Human Development

Objective

The purpose of this project is to supplement provider efforts in reducing unwanted teen pregnancies. The project involves the creation of an automated interactive multimedia program for use by adolescents in clinics and other health care settings.

Assessment of Need

The program was developed in response to high rates of teen pregnancies. Culturally appropriate educational and motivational materials specifically tailored to Caucasian, African American, and Hispanic adolescent populations are being developed in order to give the program maximum effectiveness. The materials are developed through extensive formative procedures, such as extensive series of focus groups with both adolescents and adult gatekeepers (i.e., adults who have some say about what programs teens will see).

Strategy and Intervention

The program presents information about anatomy, physiology, and contraception to adolescent patients, using a format

that encourages postponement of sexual intercourse for the sexually inexperienced, and use of effective contraceptive methods for those who are sexually active. Emphasis is placed on the use of barrier contraceptive techniques for those who are not in long-term monogamous relationships. The program is designed to tailor itself to the user based on user-provided information concerning sexual history and demographics (e.g., age and race/ethnicity).

Evaluation Strategy

The effectiveness of the programs in promoting effective contraception will be evaluated with a randomized clinical trial. This project will also determine the acceptability (to patients and providers) of an interactive multimedia-based intervention in primary care medical settings.

Implications for Practitioners

The interactive multimedia system offers several advantages over more traditional health care provider approaches to education and planning about contraception and sexuality: significantly less personnel time is required, efficiency and ef-

ficacy is increased through dynamic tailoring of the intervention to patients' needs, the material seen by every patient is presented consistently and thoroughly, behaviors and attitudes appropriate for effective contraception are vividly modeled, and the

interactive medium increases user interest and attention to the material.

For more information, contact John Noell, PhD, or Lynne Swartz, MPH, Oregon Center for Applied Science, Inc., 1839 Garden Avenue, Eugene, OR 97403; phone: (541) 342-7227.

Program: Interactive Health Risk Appraisal for Behavior Change

Sponsor: National Heart, Lung and Blood Institute

Objective

The purpose of this project is to assist medical providers in empowering their patients to make lifestyle changes that will significantly affect health and longevity.

Assessment of Need

The program responds to patients' needs to access personalized, easy-to-understand health risk data and to receive self-help information about and referral to appropriate behavior change interventions.

Strategy and Intervention

Patients using the Interactive Multimedia Health Risk Appraisal (IMM-HRA) respond to questions on a touchscreen kiosk about their medical history and lifestyle habits. The IMM-HRA selects video segments to explain the patient's health risks and describe which lifestyle changes would have the greatest positive impact. Credibility and self-efficacy are enhanced by having actors who resemble the patient in terms of age, gender, and race/ethnicity give testimonials about what they did to *make successful life changes*. Suggested

change strategies include interactive video interventions also available at the kiosk (e.g., programs on smoking cessation). To reinforce positive, existing behaviors, patients are presented with a review of their good lifestyle habits. The program concludes by giving the patient a printed summary of a "Change Plan" and personalized report.

Evaluation Design

The IMM-HRA was evaluated with 42 respondents, assessing their risk perception, behavioral intention, and self-efficacy.

Implications for Practitioners

This interactive system offers several advantages over more traditional approaches: (a) little staff time is required, (b) the program's interactivity allows self-pacing and unlimited review of material, (c) the video report is personalized to each user's specific health history and lifestyle habits, (d) motivation to change is enhanced as positive behaviors and attitudes are modeled via demographically matched testimonials.