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BACKGROUND

- Sex education in children and adolescents is influenced by culture, religion, ethnicity and morality, and is ideally given through multiple sources to achieve the evidence-based comprehensive model, including healthcare providers, school-based educators, parents/guardians, families, and mentors.
- Between 2006-2010 and 2011-2013, there was a significant reduction in adolescents' receipt of formal sexuality education (1). While it is speculated that adolescents' may have turned to the internet for reproductive health information, it is unknown which sources they used and trusted the most that led to this decline in teen pregnancy and birth rate.
- It is also not known what types of information that adolescents seek out from online sources vs. from friends, family, or others.
- Sexual health information can be reliably provided to teens via online modules and websites. However, the quality of online material varies.



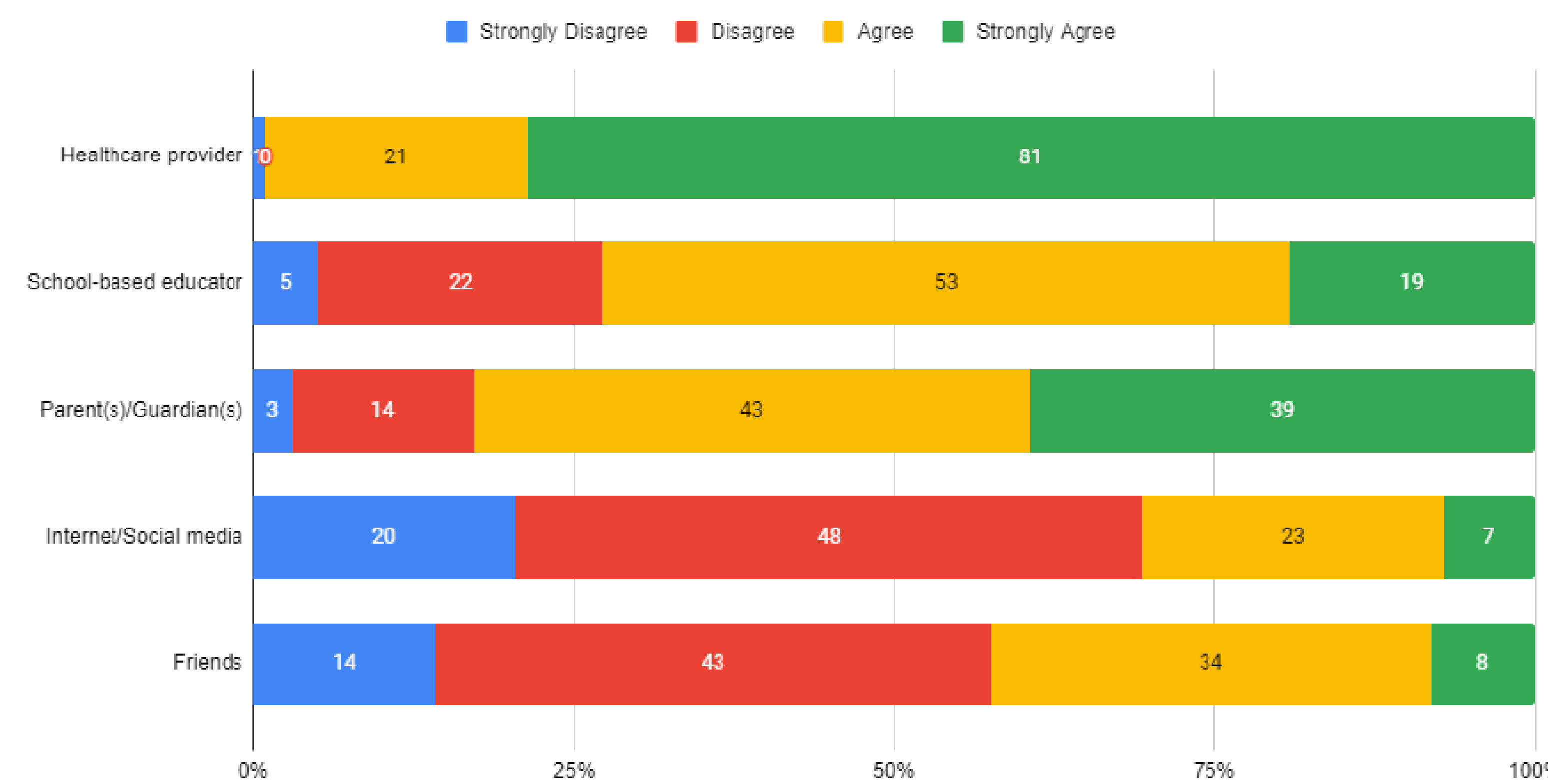
METHODS

- The study uses a semi-structured interview where teens are asked about where they seek out sexual health information for different topics and why they might use those sources over others, as well as 4-point Likert scale surveys. Surveys lasted ~10 minutes after medical visits at the Adolescent Medicine clinic in the Child Health Pavilion.
- Thematic analysis methods were used to first create codes for participant responses, group those codes into themes, and draw conclusions from the most expressed ideas. Quantitative analysis of Likert-scale survey responses was also used.

SURVEY RESULTS

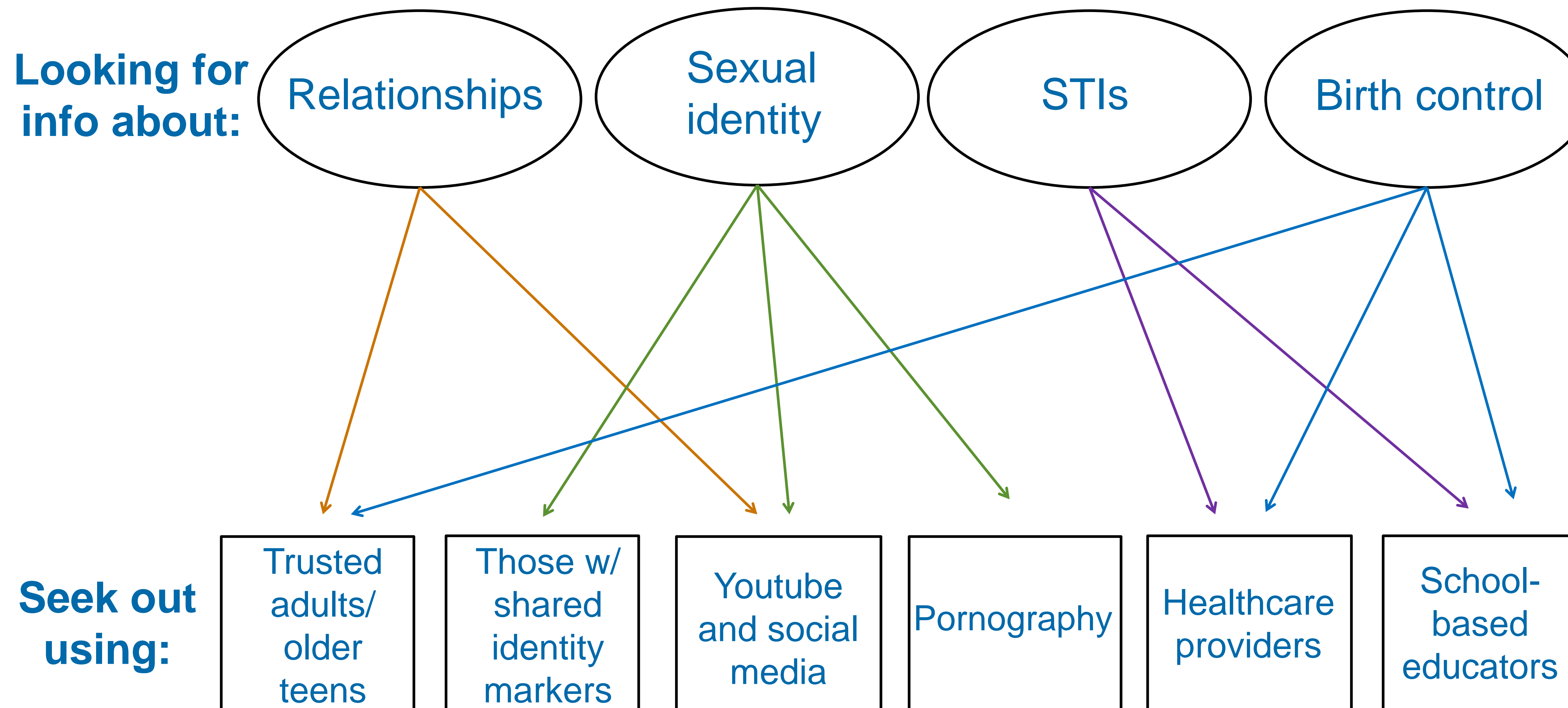
The sample consisted of N=105 participants with a mean age of 16.27 years old. Participants were 65.4% female and 64.7% identified as heterosexual. 71% reported receiving sex education in school (91% attended public school). 95% of participants were born in the US and 61% had parents born in the US.

Figure 1. Adolescent perception of trustworthiness of formal and non-formal sex education sources



- Late-stage adolescents were less likely to perceive information from parents as trustworthy compared to early and middle-stage adolescents (77% vs. 83% vs. 89%, p=0.035).
- Middle stage adolescents were more likely than early and late-stage adolescents to perceive information from the internet as trustworthy when seeking it out themselves (59% vs. 29% vs. 35%, p=0.031).
- Adolescents with parents born in the US vs. outside the US are more likely to report positive experiences with sexual education provided by family members (50% vs. 19%).

INTERVIEW RESULTS



CONCLUSIONS

- Healthcare providers are perceived as accurate and trustworthy sources of sexual health information, although it may not be where adolescents most often seek out this information.
- Differences in information-seeking behavior may align with development stages in adolescents, such as middle-stage adolescents use of the internet due to prioritizing privacy and assertion of independence.
- Differences in where adolescents seek out certain types of information (STIs, relationships, birth control, etc.) may be related to the need for established trust or face-to-face delivery of information.

IMPLICATIONS

- The variety of sources utilized by adolescents to explore themes related to sex and relationships demonstrates the continued need for comprehensive sexual education.
- The internet is a key part of modern sexual education, and that exploration is mostly self-guided by adolescents. While many expressed the importance of evaluating their online sources, there should be explicit instruction on how to identify reliable websites.
- Adolescents with parents born outside of the US, often in more sexually conservative cultures, may have unique challenges to accessing sexual health information and discussing sex at home.
- Limitations include 4-point Likert scale, English speaking teens, and setting in Ado Med clinic.

DISCLOSURES

This is an unfunded study with no conflicts of interest of disclosures.

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