

A school-based social-marketing intervention to promote sexual health in English secondary schools: the Positive Choices pilot cluster RCT

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Plain English summary

Positive Choices pilot cluster RCT

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Plain English summary

We developed a new school-based programme to prevent unplanned teenage pregnancy and promote sexual health. This consisted of teacher training, a student–staff committee to plan activities, a report of student needs based on survey responses, sex education lessons for year 9 students, students planning campaigns on sexual health, and reviewing school sexual health services. This intervention was finalised with staff and students from a secondary school and the Sex Education Forum (a charity advocating for and providing relationships and sex education). We tested whether or not the intervention was deliverable and acceptable in the secondary school with which we collaborated; the intervention was deliverable and acceptable, with some refinements. We then conducted a pilot evaluation with six schools across south-east England. This examined whether or not a larger study to assess impacts on pregnancy and sexual health would be feasible in terms of the intervention and the research methods, so that we could be sure that this larger study would be worthwhile. Of the six schools participating in the pilot evaluation, four were randomly chosen to deliver the intervention and two acted as comparisons. We surveyed students on their knowledge, attitudes and experiences just before this random selection and then 1 year later after the intervention had been delivered in four schools. Schools were happy to be randomly chosen and to have their students surveyed. Students and staff were happy to participate in the research and the intervention. The intervention was delivered in line with targets in three of the four schools, and was acceptable to the staff and students. The new lessons covered key topics more thoroughly than lessons in comparison schools. Examination of official records of births and abortions showed that there were none among the students who took part in the pilot. Our questionnaire measures generally worked well. It would be useful to examine the impacts of the intervention in a larger study. This should focus on a broader measure of sexual health than teenage pregnancy alone.

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