



# Program Abstract

## Summary

*FOCUS* was originally delivered to young U.S. Marine Corps women recruits. This four-session cognitive-behavioral group intervention aimed to prevent sexually transmitted infections (STIs) and unintended pregnancies.

Following a baseline survey and self-administered vaginal swab (to detect STIs), 2,157 women were voluntarily randomized into either the experimental group (n=1,062) or the control group (n=1,095) during their first week of recruit training. Baseline pregnancy screening was conducted by the Marines on all women prior to entry into recruit training. Both experimental and control groups received interventions of four two-hour sessions, delivered during the first, second, fourth and twelfth weeks of recruit training.

Of the original sample, 88.8% (n=1,916) completed the intervention *and* graduated from the 13-week recruit training (more than 240 were discharged prior to completing the recruit training, and were lost to the intervention). At first follow-up, approximately one month post-intervention, survey data were collected from 80.8% (n=1,743) of the original sample. At second follow-up, approximately 14 months after the intervention, survey data were collected from 64% (n=1,381) of the original sample.

The evaluation results revealed that a higher proportion of the control group had a post-intervention STI or unintended pregnancy (Odds Ratio = 1.41, 95% Confidence Interval = 1.01-1.98). Among participants who had no history of STIs or pregnancy, but who engaged in risky sexual behaviors just before recruit training, the control group was more likely to acquire a post-intervention STI (OR = 2.05, CI = 1.74-4.08), and have had multiple sexual partners (OR = 1.87, CI = 1.01-3.47) post-intervention.

## Focus

Primary pregnancy prevention

Secondary pregnancy prevention

STI/HIV/AIDS prevention

## Original Site

School-based

Community-based

Clinic-based

## Suitable for Use In:

*FOCUS* is suitable for use in group or classroom settings in clinics, community-based organizations, or schools/colleges. Although it was

## Program Abstract (continued)

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developed for use with military recruits, it may be adapted for non-military populations. *It should be noted, however, that the subject matter is mature and in some cases quite graphic in nature, and may not be appropriate for participants under the age of 16.*

### Approach

- Abstinence
- Behavioral Skills Development
- Community Outreach
- Contraceptive Access
- Contraceptive Education
- Life Option Enhancement
- Self-Efficacy/Self-Esteem
- Sexuality/HIV/AIDS/STI Education

### Original Intervention Sample

Age, Gender      The original intervention sample included 2,157 young women, aged 17 or older; approx. 90% of the sample was 22 or younger.

Race/Ethnicity      More than half of the participants (56%) were Caucasian, 19.7% were Latina, 16.1% were African American, and about 5% identified as "other."

### Program Components

- Adult Involvement
- Case Management
- Group Discussion
- Lectures
- Peer Counseling/Instruction
- Public Service Announcements
- Role Play
- DVD
- Other: PowerPoint slide presentations

### Program Length

This four-session intervention was implemented in two-hour segments. However, each segment is divided into several discrete modules, allowing implementation in shorter segments if necessary.

### Staffing Requirements/Training

In the original implementation of *FOCUS*, the intervention was facilitated by two research assistants with groups of 20-25 participants. *FOCUS* facilitators should be women who are both familiar and comfortable with the mature subject matter included in the *FOCUS* curriculum.

## *Program Abstract (continued)*

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### *Notes about Evaluation*

This program includes a copy of the three written evaluation instruments used in the intervention's original evaluation. Additional resources for evaluation are also included:

(1) *Prevention Minimum Evaluation Data Set (PMEDS)*, a generic questionnaire that can be adapted to suit most prevention programs, and

(2) *Local Evaluator Consultant Network Directory*.

Should you choose to evaluate the effects of the *FOCUS* program in your setting, these evaluation materials will help you begin your evaluation. Before using these or any survey instruments with your participants, it is very important that consent be received from the appropriate people in your community (e.g., school officials, parents, etc.). Most programs can benefit from outside help in designing and carrying out an evaluation. Your local university may be a good place to look for outside help—or you may refer to the *Local Evaluator Consultant Network Directory*. For further information, call PASHA staff (see below).

### *Contact Information*

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### *Bibliography*

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