PROJECT INFORMATION

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Testing a Clinic-Based Program to Reduce Risky Behaviors among Teens

Principal investigator

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Organization

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What was the research about?

Risky behaviors, including eating poorly, not getting enough sleep or exercise, using drugs, and not wearing a helmet or seatbelt often emerge during the teen years. By talking with teens during clinic visits, doctors may help to reduce these behaviors.

In this study, the research team created a program about risky behaviors that had two parts:

- Doctors took a training on talking with teens about risky behaviors.
- Teens took an online survey that asked about risky behaviors. The survey gave them feedback to encourage healthy choices. It also gave doctors personalized recommendations for their patients.

The research team compared teens who were and weren't in the program.

What were the results?

Teens who were and weren't in the program didn't differ in

- How satisfied they were with their clinic visits
- How satisfied their parents were with clinic visits
- How empathetic they said their doctors were

After three months, compared with teens who weren't in the program, teens who were in the program reported fewer risky behaviors. But after 6 and 12 months, the two groups no longer differed.

Compared with teens who weren't in the program, teens in the program said they received counseling about risky behaviors more often during their initial clinic visits. The two groups didn't differ in

- How often they received follow-up care for risky behaviors
- How ready they said they were to change their behavior

Who was in the study?

The study included 302 teens who received care at six clinics in Seattle and their parents. Of the teens, 70 percent were white, 9 percent were Asian, and 15 percent were other races; 6 percent were Hispanic. The average age was 15, and 52 percent were girls.

What did the research team do?

The research team assigned a program start date by chance to the six clinics. In the first 10 weeks of the study, doctors had clinic visits as they normally would. Teens filled out a survey about risky behaviors before their visit for data collection only. After 10 weeks, doctors completed training on talking about risky behaviors. In the next 10 weeks, clinics started giving teens the program's online survey before clinic visits. Doctors received a summary of each teen's risky behaviors and suggestions for next steps for their care before the visits.

One day after their clinic visits, teens and parents filled out a survey about the visit. Teens filled out follow-up surveys about their risky behaviors 3, 6, and 12 months later.

Teens, parents, and doctors gave input to the research team throughout the study.

What were the limits of the study?

The study took place in one city, and 70 percent of teens were ages 13–15. Result may differ in other settings or with older teens.

Future studies could test the program with older teens or add other programs to address specific risky behaviors.

How can people use the results?

Health clinics can use the results when considering ways to reduce risky behaviors among teens.

To learn more about this project, visit www.pcori.org/McCarty311.