

# Targeting Teenage Girls: Focus-group Discussions Give Young Women the Tools They Need to Make Better Decisions about Reproductive Health

BY KATHRYN UTAN

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Photo: Suzanne E. Grimman.

The teenage years are a time for exploring new feelings and emotions. Educating young people about reproductive health and the importance of safe sex can help them avoid high-risk behavior that can lead to disease or an unwanted pregnancy.

The first thing I tell my girls is that if they are going to have sex, they have to act responsibly,” explains Natalia Rebrova, deputy chief physician of the Khor District Hospital and member of AIHA’s Khabarovsk/Lexington partnership. “Of course, it is better if they wait until they are older and better prepared to begin having sex, but it is simply a reality that many of them become sexually active at ages 14, 15, or even younger. It is senseless to warn them not to do it because, in the end, they will find a way to do what they want.”

Rebrova’s “girls” are students at three schools in the Khabarovsk Krai, a primarily rural, agricultural region in Russia’s Far East. Most have lived in the area their entire lives and are between the ages of 15 and 17. Some attend a regular high school, some attend evening classes, and others—those who have various emotional or behavioral problems—go to a more specialized school. “This is really quite a small world, so when the collapse of the Soviet Union ushered in all these images of sexual freedom, many of our teenagers were unprepared to deal with the temptation to live their lives



like the people they saw in movies or read about in books and magazines,” Rebrova explains. “The villages here are tightly-knit communities where everyone knows one another and what each person is doing. Many adults look down on the teens and don’t approve of the things that they do and the way they live their lives. This just serves to widen the generation gap.” Instead of condemning the girls for their lifestyle choices, Rebrova decided to look for a solution.

### Finding the Right Approach

An OB/GYN for more than 20 years, Rebrova first began holding informal talks with groups of teenage girls at area schools eight years ago when she noticed increasingly high rates of abortions and sexually transmitted infections (STIs) among this segment of the population. It was difficult at the beginning—there were no books or literature available then on effective ways of discussing sexuality and reproductive health with young girls. “When I started this type of educational outreach work, I lectured at the schools in front a large classroom full of girls. I always asked the teachers to leave the room because many of them were older and didn’t really approve of the things I was talking about,” Rebrova explains, noting that she soon discovered that this forum wasn’t conducive to an open discussion of the sensitive matters she was attempting to broach.

“I quickly realized that—even without their teachers present—such a large audience made the young ladies too shy and embarrassed to ask questions. They were afraid that the others would laugh at them. It was also very difficult to target the discussions to the most important subjects because the needs of such a large group of people are too varied.” After trying and discarding several alternative approaches, Rebrova finally decided to split the girls into smaller, more easily focused groups, of between six to 12 people.

“I had been working with the public for years to try to find ways of ensuring that the clinical and educational services I provide meet their needs, so I had already concluded that focus groups are an effective approach for determining health topics that are of concern to specific segments of the community,” Rebrova asserts. Different focus groups can be created for small children, women working at local indus-

tries, expectant mothers, or, in this particular case, teenage girls. The only prerequisite, she notes, is that the members of the groups have common characteristics, interests, and experiences. “With the teen groups, I would say that they are, in reality, part focus group and part health education class. I provide them with the information they need to stay healthy and they provide me with the information I need to develop appropriate programs and services for them. Ultimately though,

my primary goal is to prevent these girls from having an unwanted pregnancy or getting an STI.”

### Listening, Learning, and Teaching

Struck from the start by the young girls’ willingness to openly discuss the most personal details of their lives once they were in a smaller, more intimate setting, Rebrova says, “I never expected them to be so frank and sincere with me—for them to pour out their feelings and emotions so readily—but they are.” She soon came to realize why: the girls are hungry for information, acceptance, and understanding. “Universally, all of the girls in these groups complain that their parents and other adults don’t understand their feelings or respect them as

individuals who have their own thoughts and desires. Ironically, they also think that the sort of information and assistance they get from the group discussions should ideally start in the home.”

In total, Rebrova meets with between 15 and 20 groups of teenage girls each month, but is quick to point out that it is not nearly enough. “There is such a need for this kind of educational outreach work among teenage populations. Unfortunately, very few people are interested in these issues. Many parents, teachers, and even some of my colleagues don’t seem to understand that letting young people grow up without the knowledge they need to make better choices regarding their health only creates a bigger problem for the future,” she says, noting that she once even invited some of the girls’ parents to come to a meeting, but none of them did.

“Talking with these girls is really fascinating for me,” Rebrova professes. “I am constantly amazed by their willingness to jump into a sexual relationship without any concern

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about the potential consequences. It doesn't matter if they come from a so-called 'good' or 'bad' family or if the parents are intellectuals or factory workers, the girls all seem to become sexually active around the same age." When she asked one group of girls why they started having sex at such a young age, Rebrova says she was surprised by their answer. "They explained to me very clearly that, according to all the information they now have access to through movies, books, music, and magazines, having sex at age 14 is quite normal in the world today. If they don't hear any differently from their parents, why would they believe otherwise?"

But the girls do hear differently from Rebrova. "I talk to them about STIs, about HIV, and about unwanted pregnancies. I explain to them that their health is a gift that they are responsible for preserving, and I tell them that terminating a pregnancy can be very traumatic not only physically, but emotionally, as well." She provides them with literature, videos, brochures, and other educational materials and she answers their many questions as honestly and openly as possible. "I love it when they ask me about sex, contraceptives, and the impact their actions could have on their health. All these questions mean they are beginning to take responsibility for themselves and for their future well-being," she maintains.

### Letting the Questions Do the Work

For a focus group discussion to be effective, the moderator must determine the ultimate purpose of the session, what kind of data he or she would like to obtain, and what kind of information to pass on to that particular group. The next steps are to develop a list of questions that will facilitate gathering the desired information and to select appropriate members of the community who not only have knowledge of the topic, but also wish to actively share their thoughts and experiences with the group, Rebrova says.

"I use a series of introductory questions to acquaint participants with the topic and give them an opportunity to articulate some of their own experiences that are related to the specific topic we are discussing. These questions are designed to fuel the conversation and encourage frank, open communication within the group," Rebrova points out. Intermediate questions then serve to help members of the focus group expand and enrich the dialogue as they become more aware of the views of others, then the third type of questions—what Rebrova terms key questions—are used to obtain the most specific and targeted information. "These key questions are essential to the success of any discussion

## > DR. NATALIA REBROVA'S PRACTICAL ADVICE FOR FOCUS GROUP MODERATORS

- Create several focus groups on the same topic to ensure a varied representation of ideas and concerns.
- Develop a set of questions that, in addition to being possible to answer quickly and completely, can also help to strengthen people's commitment to participating in the focus group.
- Arrange to have someone else record or take notes of the proceeding so that your ability to listen and interact will not be impaired.
- Select a location to hold the meeting that is comfortable, neutral, and easily accessible to the group members.
- Choose a convenient day and time for the focus group to meet (midweek during lunch or in the early evenings is better for most people).
- Send each participant a formal invitation and a request for consent to use the information he or she provides during the discussion. This is also an opportunity to provide the group members with brochures, checklists, or other necessary materials.
- Personally greet each participant before the discussion begins and make sure that he or she understands the purpose and the parameters of meeting.
- Keep the duration of the meeting between 45 and 60 minutes; people often become distracted or resentful if too much of their "free" time is taken up.
- Encourage each participant to express his or her true opinions even if they differ from what the other group members are saying.
- Assure the participants that their responses will be kept confidential.
- Thank each participant for his or her time and contribution to the discussion.
- Review the results of the discussion to identify common motives and areas in which opinions converge or diverge, then draft a summary report detailing the data.
- Use the information obtained during focus group discussions to enhance the quality of medical services and better meet the needs of your patients.



Natalia Rebrova

Photo: Suzanne E. Girman.



and are used to reveal specific information that is directly related to the topic,” she explains. To wrap up the focus group session, Rebrova may ask a few final questions designed to provide closure to the discussion or, depending on the participants, give a brief summary of the ideas expressed during the meeting before inviting members to offer their own comments.

While these guidelines are generally applicable to just about any focus group, moderators should be willing to adapt the format of the discussion to meet the needs of the participants, Rebrova stresses. “When I begin the sessions with a new group of girls, for example, I often have them write down their questions on pieces of paper and turn them in at the end of the first meeting. That way, I can answer their questions at the next gathering without revealing who asked what.”

As a method of analyzing a particular health-related problem and culling information from those closest to that topic, focus groups can be highly effective, Rebrova asserts. “Focus groups offer a low-cost, simple, and time-effective way to gauge the knowledge, needs, and opinions of certain segments of the population as they relate to a specific topic. In addition, analyzing participant responses can help a clinician develop new, more appropriate approaches to planning and providing medical services in his or her community.”

### Educating Teens, Educating Adults

Looking to spread her message of safe sex even further, Rebrova also appears regularly on a health program that is broadcast on a regional television station. “It is not only the young girls who need accurate information about reproductive health. Women in their 20s, 30s, and even older are often misinformed about these matters,” she explains. “It is not terribly uncommon for one of the girls who participates in the focus groups to be better informed about reproductive health than her mother. Because many of the mothers are my patients, I use their visits as an opportunity to educate them. I hope this will encourage them to open up the lines of communication about sex and reproductive health with their daughters.”

But what parents and other adults really need to know is how to be patient and listen to what teenagers are trying to tell them, Rebrova concludes. “Young people are really not so different from adults. They want the rest of the world—their parents, their neighbors, their friends, and their teachers—to understand them. They want to fit in. I understand this and it is my job to try to help them.” ■

## > THE TRUST CLUB: A UNIQUE APPROACH TO ADOLESCENT HEALTH

By Evangeline Coleman-Crawford / AIHA Editorial Assistant

Dalet and Gulzhan never imagined that their simple quest for information about HIV/AIDS would lead them to become so involved in their community. With many questions—including what causes HIV/AIDS and how it spreads—and not enough information about the virus available through their school, these 15-year-old Kazakh teens went looking for answers at the Demeu Family Medicine Center (FMC), which was established as part of the Astana/Pittsburgh partnership. What they found was not only honest, accurate information, but an opportunity to help other teens as peer counselors.

Adolescence is a critical stage of development in a child's transition to adulthood, and many young adults find this period filled with confusing and stressful situations that can put them at risk. Because they are no longer considered children, and yet are not quite adults, this phase of life can be both challenging and difficult to comprehend. This is partly because teens often do not know how to deal with many of the problems they face, nor are they ready to cope with society's overwhelming demands. Additionally, at the same time that adolescents are undergoing physical changes, they are struggling to develop their sense of identity and to establish stable, productive peer relationships that are of extreme importance to them. Furthermore, their reluctance to talk about physical, emotional, family, and personal issues with healthcare professionals and other adults means they are more likely to discuss many of their concerns with their peers. While this may make them feel better, lack of facts also leaves them vulnerable and easily misled by inaccurate information. Realizing that positive interventions introduced during this

time when most behaviors and habits are formed can forever shape the future of an individual, partners in Astana established the Trust Club.

Organized by FMC staff, the Trust Club is a community-based program that targets school-aged and physically disabled children, young adults, and single adolescent mothers to promote healthy habits. The Club provides members with accurate and useful information on a wide range of issues, including health and nutrition, romantic relationships, sexual reproduction, violence prevention, substance use and abuse, and the prevention of unintended pregnancies. The partners hope to arm young people with the knowledge and skills necessary to make sound decisions so they can lead longer, healthier, and more productive lives. The Trust Club's name reflects the partners' strategy, which is to gain the trust of young adults in order to facilitate communication and create an environment where health-related information can be shared. One of the ways the Center's staff are working to gain trust is by getting adolescents like Daulet and Gulzhan involved as teen instructors.

Trust Club members—aged 10 to 18—meet once a week, either at a school, the FMC, or the home of a physically disabled member. Roza Abzalova, FMC chief physician, and Altynai Tungushbaeva, FMC internist, lead most of the discussions, but are often joined by nurses, other physicians, and volunteer teen instructors trained by FMC staff. According to Abzalova, about 2,000 people currently participate in Trust Club activities. "The Club is having a noticeable and positive influence on young adults in Astana, particularly on their attitude toward sexual activity," she says, noting that many are now opting to abstain from early sexual involvement. The Astana partners also acknowledge that the teen instructors are an essential component of educating local youth because peers so often play influential roles in each other's lives.

The Trust Club program encourages

the peer education approach by training adolescents to become teen instructors who act as assistants to healthcare professionals in disseminating a wide variety of health-related information among their peers. For example, teen instructors—under the supervision of a physician, nurse, or other healthcare practitioner—often lead meetings in school or

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community settings where they share what they have learned. In their capacity as volunteers and active members, Daulet and Gulzhan also help to take care of local disabled children. When some parents cannot spend time with their disabled young children because of work or other obligations, Daulet and Gulzhan and other teen instructors take the children for outings to area parks and on walks so that they can enjoy the outdoors and sunny weather. The teens believe that they can help to strengthen the health of these children by giving them the extra care and attention that

their parents cannot always provide. During time spent with the children, Daulet and Gulzhan also share with them what they have learned through the FMC.

To maintain teens' interest and encourage their participation in the program, partners use both formal and informal health promotion activities, including the production of plays that depict the harmful effects of alcohol, drugs, and smoking, as well as lively discussions about premature sexual activity and the prevention of TB and STIs. Using a variety of large and small group meetings, and one-on-one discussions for confidentiality, the Trust Club involves family doctors, nurses, social workers, volunteers, and community leaders who work directly with adolescents. While some of the Club's activities focus on strengthening both the physical and mental health of adolescents, others focus on developing their social and cognitive skills. The Club provides an outlet where teens can learn directly from healthcare professionals to eliminate myths and misconceptions about many of their concerns, particularly issues regarding sexuality, intimacy, pregnancy, and drugs, which are often the most common topics of conversations among young adults.

"The need for such a program is evident in the number of teens that currently participate in the club," says Abzalova. "As a vulnerable group, teens need to be provided with ways to communicate that are comfortable for them. This facilitates open discussions and allows us to instill health promotion concepts and knowledge in a non-threatening way."

Currently in their 9th form—equivalent to the 10th grade in the United States—Daulet and Gulzhan say that they made the right decision to trust Demeu staff and seek answers directly from healthcare professionals. They are pleased with the extent of information they get on issues of importance to them, and hope that their role as peer instructors helps to improve the knowledge—and therefore lives—of other teens. ■