

## **To improve teenagers' knowledge of emergency contraception (EC)**

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**Objective:** To improve teenagers' knowledge of emergency contraception (EC). **Background:** EC is an effective and safe method of contraception. Appropriate use of EC could prevent up to 75% of unplanned pregnancies. Sex education can improve knowledge about contraceptive methods and may increase the age at first intercourse. Recent reviews of methods of preventing and reducing the adverse effects of unintended teenage pregnancies emphasise the need for further evaluation of sex education interventions in schools. In a survey carried out in south east Scotland, awareness of EC in 14-15 year olds was high but knowledge of the specific details, such as timing, poor. There is a need to investigate methods of improving the knowledge base and appropriate use of EC.

**Design:** Cluster randomised controlled trial.

**Setting:** 24 mixed sex state secondary schools in Avon, south west England.

**Participants:** 1974 males and 1820 females in Year 10 (14-15 year olds).

**Intervention:** Teacher led lesson on EC utilising active learning methods following training from an "expert".

**Primary outcome measure:** Knowledge of the correct time limits for hormonal EC six months following the intervention.

**Secondary outcome measures:** Proportion non virgin; use of EC.

**Results:** Male and female outcomes were analysed separately. The primary outcome was analysed using a school-level weighted analysis adjusting for: baseline score; percentage of pupils requiring free school meals; size of school; whether sex education is taught by a tutor or team of teachers; and whether sex education was mainly taught in Year 9 or Year 10. The proportion of both males and females knowing the correct (72 hour) time limits for hormonal EC was significantly higher in the intervention than control group (males: 15.7% higher, 95% CI 6.8-24.6%,  $p=0.002$ ; females: 20.0% higher, 95% CI 10.1-30.0%,  $p=0.001$ ). There was no evidence for any change in sexual activity or use of EC between intervention and control groups.

**Conclusion:** The lesson significantly improved the proportion of both males and females knowing the correct time limits for hormonal emergency contraception with no change in sexual behaviour between the two groups.