Title: Interactive digital interventions for sexual health promotion among young people: systematic review

Problem: Interactive digital interventions (IDIs) have potential to promote sexual health (SH), particularly as frontline services are cut, and among young people who experience a disproportionate burden of adverse SH. Most young people use primary care, but tend to have short consultations, and SH concerns may not be discussed. We investigated the effectiveness of IDIs for SH promotion for young people.

Approach: We undertook a systematic review, using Cochrane Collaboration methods. We searched databases for randomised controlled trials (RCTs) of IDIs for SH promotion with people ≤25yrs, and health economic studies, to June 2017. Two authors independently screened records, determined inclusion/exclusion, and applied quality criteria. We pooled results using random effects models, using standardised mean differences (SMD) for continuous outcomes and odds ratios (OR) for binary outcomes.

Findings: 23 RCTs compared IDIs with minimal interventions (e.g. leaflet). IDIs had moderate positive effects on knowledge (SMD:0.48, 95%CI:0.19,0.78), and small positive effects on intention (SMD:0.10, 95%CI:0.01,0.18) and behaviour (OR:1.20, 95%CI:1.02,1.41), but no statistically significant impact on self-efficacy or biological outcomes.

Four RCTs compared IDIs with face-to-face interventions. IDIs had slightly greater impacts on self-efficacy than face-to-face interventions (SMD:0.16, 95%CI:0.07,0.26). There was no evidence of difference in impact on knowledge, intention or behaviour. We found no eligible health economic studies.

Implications: IDIs present an opportunity for effective SH promotion to young people, and could complement time-limited consultations. They can be used in primary care, SH clinics, educational settings, and online. To optimise impact, effective SH IDIs need to be integrated into practice (e.g. electronic records).

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