

PRO TEEN

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About CAAH and Pro-Teen?

The Canadian Association for Adolescent Health (CAAH) is a non-profit organization that promotes the health and well-being of all Canadians adolescents between the ages of 12 and 19, regardless of race or social standing.

The CAAH was founded in 1993 by a group of Canadian paediatrician under the leadership of Dr Jean-Yves Frappier, paediatrician, head of adolescent medicine at CHU Sainte-Justine. The CAAH brings together professionals from various backgrounds are areas of expertise related to adolescent health and well-being. The CAAH team is based at CHU Sainte-Justine in Montreal, Québec, Canada.

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News

- **A Society for Adolescent Medicine (USA) statement about teens issues in the actual health care reform in US**

The present moment is a critical juncture for health care reform. SAM is participating in the process as an organization. As health professionals, we think there are issues that need to be addressed for adolescents and young adults as health care reform moves forward. Today, July 14, 2009, SAM has released a new policy statement containing a set of principles for health care reform in the interest of adolescents. These documents are available on SAM's website at <http://www.adolescenthealth.org/>.

- **A DVD with the best videos of the CAAH STI-HPV-Vaccine contest**

A DVD showing the winning videos and those with a special mention after the contest organized by CAAH in 2008. This DVD could be shown as a starter for discussion with groups of teens, in class or wherever appropriate. To order a free copy, contact CAAH: acsacaah@globetrotter.net; fax 514 345-4778.



Scientific event

- **International Association for Adolescent Health, 9th World Congress**

Private Lives, Public Issues Global Perspectives On Adolescent Sexual Health

28-30 October, 2009
Kuala Lumpur, Malaysia

Website: <http://www.iaah2009.com/>

Tentative Scientific Programme: <http://www.iaah2009.com/documents/iaah2009%20scientific%20content.pdf>

- **Society for Adolescent Medicine, 2010**

The annual meeting of the Society for Adolescent Medicine will be held outside the US in 2010. Toronto will host the meeting April 7-10 2010. For more information, visit the SAM website:
<http://www.adolescenthealth.org/>



Articles

• Article explore eating behaviors and attitudes among food insecure adolescents

"We found that food-insecure youths had several known eating-related risk factors for overweight," write the authors of an article published in the May 2009 issue of the American Journal of Public Health. Food insecurity, or not having access to enough food for an active, healthy lifestyle because of a lack of resources, is a continuing problem in the United States. Growing up in a food-insecure household places burdens on adolescents. Because of the increasing prevalence of childhood obesity in the United States, the effect of food security on both weight outcomes and predictors of obesity is of special interest. Using data gathered for Project EAT (Eating Among Teens), the authors sought to assess barriers to healthy eating as well as the availability of healthy and unhealthy food among food-secure and food-insecure adolescents. The authors also aimed to compare eating habits and nutritional intake between these two groups.

As part of Project EAT, an observational study of the socioenvironmental, personal, and behavioral determinants of dietary intake and weight status among a large and ethnically diverse population, the authors surveyed 4,746 middle- and high-school students in 31 primarily urban schools in Minneapolis-St. Paul, MN, during the 1988-1999 academic year. Participants completed in-class surveys that included questions on benefits and barriers to healthy eating, food availability, and food security.

The authors found that

- * Among respondents, 8.4 percent of adolescents reported being hungry at least once in the past year because their family could not afford food. For home food adequacy, 4.4 percent of adolescents reported that often or sometimes they do not have enough to eat. Both food security items were significantly correlated with ethnicity, public assistance, and eligibility for free or reduced-price lunch.

- * Adolescents who reported a hunger frequency of "almost every month" in the past year were more likely than those in the rest of the sample to report both inconvenience and food preference as barriers to healthy eating.

- * Fully food-secure adolescents ate family meals and breakfast more often than did the other groups.

- * Food-insecure adolescents were less likely than their food-secure counterparts to meet the Healthy People 2010 goal for percentage of calories from fat.

- * Adolescents who reported a home food inadequacy of "often" ate an average of 2.15 fast-food meals per week, compared with 1.73 fast-food meals per week eaten by adolescents who reported no hunger in the past year.

- * Adolescents who reported no hunger in the past year were least likely to have a body mass index greater than or equal to the 95th percentile.

The authors conclude that, "rather than educating food-insecure youths as to why they should be eating healthfully, efforts should be made to eliminate barriers to healthy eating."

Widome R, Neumark-Sztainer D, Hannan PJ, et al. 2009. Eating when there is not enough to eat: Eating behaviors and perceptions of food among food-insecure youths. American Journal of Public Health 99(5):822-828.

Abstract available <http://www.ajph.org/cgi/content/abstract/99/5/822>.



• **Study assesses adolescent physical activity, screen-based media use, and health indicators in the USA and Canada**

These findings suggest "positive consequences of PA [physical activity] for varied indices of psychological and social health. In contrast, SBM [screen-based media] was modestly but consistently associated with individual perceptions of poorer physical health, quality of life, and quality of family relationships," state the authors of an article published in the May 2009 issue of the *Journal of Adolescent Health*. Independent of the direct influence of family on PA, the potential relationship of adolescent PA to quality of family relations has not been well investigated. Other than the literature on sports participation and specific health problems or risk behaviors, there is relatively little research relating PA to negative health indicators. Compared with the amount of evidence on PA, there is less evidence on the relationship of SBM with positive or negative health indicators other than aggression and substance use. Finally, most of these studies are of small samples from limited geographic areas. The article describes a study to examine the independent relationships of PA and SBM with positive and negative health indicators in adolescents.

Data for the study were drawn from the Health Behavior in School-Aged Children survey (HBSC), a collaborative school-based survey with standardized methods and survey items across over 40 countries and regions. The surveys sampled students in grades 6-10 during the 2001-2002 school year. The current study analyzed data from the nationally representative HBSC surveys conducted in the United States and Canada. Measures included PA, SBM use, positive health indicators, physical self-image, physical health status, quality of life, quality of family relationships, quality of peer relationships, negative health behaviors, health complaints, physical aggression, tobacco use, alcohol use, and marijuana use. The analyses identified simple relationships between indices and compared differences across genders.

The researchers also evaluated whether country had an effect on the relationship between the predictor and the outcome.

The authors found that

* There were minimal cross-country differences in the variables assessed.* PA was positively related to all the positive health indices (physical self-image, physical health status, quality of life, and quality of family and peer relationships).

* Frequency of PA was inversely related to cigarette smoking. However, PA was positively related to physical aggression. PA was negatively related to health complaints in U.S. boys and to marijuana use in U.S. boys and Canadian girls. PA was positively related to alcohol use in Canadian boys.

* SBM was negatively related to most of the positive health indices (physical health status, quality of life, and quality of family relationships). However, SBM was positively related to quality of peer relationships.

* In both countries, SBM was positively related to health complaints, physical aggression, cigarette smoking, and alcohol use.

"These patterns provide a strong argument for the promotion of PA and the reduction of SBM in adolescents," conclude the authors.

Iannotti RJ, Kogan MD, Janssen I, et al. 2009. Patterns of adolescent physical activity, screen-based media use, and positive and negative health indicators in the U.S. and Canada. *Journal of Adolescent Health* 44(5):493-499.

[http://www.jahonline.org/article/S1054-139X\(08\)00585-5/abstract](http://www.jahonline.org/article/S1054-139X(08)00585-5/abstract)



• Text message line for teen sex education questions

The New York Times examined how some teen pregnancy prevention programs are using technology to connect with teenagers and improve access to sex education. The Times profiled the Birds and Bees Text Line, an educational text messaging service operated by the Adolescent Pregnancy Prevention Campaign of Durham, N.C. Teen pregnancy rates have been slowly climbing since 2003 in North Carolina, where schools teach abstinence-only sex education curricula. The state now has the ninth-highest teen pregnancy rate in the country, the Times reports. The Birds and Bees Text Line allows teens to obtain medically accurate answers to sex- and health-related questions through personal, anonymous text messages. The line has nine staff members who have graduate degrees in public health or social work, or have many years' experience working with teens. Under the program's guidelines, staff members do not give medical advice, instead instructing teens to see a doctor or referring them to local clinics, Web sites or emergency hot lines. The program is supported by a \$5,000 grant from the state health department that pays for the cell phone line and advertising. The program is modeled after a similar effort in Alexandria, Va.

The Times reports that the North Carolina text line is one of several efforts across the country in which health educators are using technology to offer teens "sex ed on their turf." Many epidemiologists and public health experts say that school sex education programs are insufficient and ineffective. While lawmakers continue to debate the merits of comprehensive versus abstinence-only sex education programs in schools, the rates of teen pregnancy and sexually transmitted infections have plateaued or begun increasing in many parts of the country. Washington, D.C., Chicago, Toronto, and San Francisco have implemented programs that allow teens to text a number to receive answers to commonly asked questions about sex and referrals to local clinics. A statewide program in California, called HookUp 365247, allows teens to text a Zip code to a number to receive the address of a local clinic.

Health researchers also are investigating how to use social networking sites, like MySpace and YouTube, to reach teens. Deb Levine, executive director of ISIS, a not-for-profit organization that has launched many technology-based reproductive health programs, said that technology takes away the "shame and embarrassment" many teens feel when talking about sex. "It's the perceived privacy that people have when they're typing into a computer or cell phone," she said, adding that "it's culturally appropriate for young people: they don't learn about this from adults lecturing them." Sheana Bull, an expert on STIs and technology at the University of Colorado School of Public Health, said, "The technology can be used to connect young people to trusted competent adults who have competent information." She noted that such technology-based services do have some limitations, including that they do not reach a large number of teens automatically and depend on human interaction.

Opponents of comprehensive education have criticized the programs as undermining the abstinence-only message taught in schools. Bill Brooks, president of North Carolina Family Policy Council, said that it "doesn't make sense to fund a program that is different than the state standards." The Times reports that North Carolina currently is debating a bill that would permit comprehensive sex education in schools (Hoffman, New York Times, 5/3).

<http://www.nytimes.com/>



• **National Institute of Drug Abuse study suggests low key anti smoking ads are likely to be remembered than attention grabbing messages**

High Sensation Images Compete with Public Health Message. For the first time, preliminary research using brain-imaging technology has shown that low-key and attention-grabbing anti-smoking public service announcements stimulate different patterns of activity in smokers' brains and that smokers are more likely to remember seeing the low-key PSAs. The study, published May 15, 2009 in the journal *NeuroImage*, was supported by the National Institute on Drug Abuse (NIDA) and the National Cancer Institute, both components of the National Institutes of Health.

Televised PSAs are an important element of campaigns that promote smoking cessation, drug abuse prevention, and other public health causes. Some PSAs take a low-key, "just the facts" approach to conveying their message, while others use attention-grabbing features such as fast pacing with frequent cuts, dramatic narration, bright colors, loud music, and shocking or surprising visual images. This study found that regions of the brain associated with attention (the frontal cortex) and memory (the temporal cortex) were more active when participants were watching the low-key PSAs compared to the more dramatic attention-grabbing PSAs. "This study highlights the feasibility of using functional magnetic resonance imaging (fMRI) to determine how the brain processes drug prevention messages," says NIDA Director Dr. Nora Volkow. "The next step is to determine whether better memory for the low key-PSAs translates into changing attitudes and behaviors. Ultimately this could improve our strategies for communicating public health information." Message sensation value (MSV) is a well-established concept in the health communications field that reflects the extent to which PSAs employ attention-grabbing features. High-MSV PSAs use many such features; low-MSV messages employ few. In this study, scientists used fMRI to visualize patterns of brain activity in 18 adult smokers who watched a series of anti-smoking PSAs. High-MSV and low-MSV PSAs were shown in random order, interspersed with video clips from a wildlife documentary. An area at the back of the brain associated with visual information processing (the occipital cortex) was more active when participants were watching the high-MSV PSAs than when they were watching either the low-MSV PSAs or the neutral video clips. By contrast, regions of the brain associated with attention and memory were more active when participants were watching the low-MSV PSAs. Afterward, participants were more likely to remember having seen images from the low-MSV PSAs than images from either the high-MSV PSAs or the neutral videos. The study "is the first scientific report to demonstrate a neurobiological basis for a concept (MSV) in health communications research," says the principal investigator, Dr. Daniel D. Langleben of the University of Pennsylvania in Philadelphia. "Our findings suggest that the attention-grabbing high-MSV format may impede the learning and retention of a PSA. The findings are also novel in that they offer a general approach for objectively evaluating PSAs before they are released." Study participants were asked only which PSAs they remembered seeing, not whether seeing any of the PSAs altered their attitude about smoking. Dr. Langleben and his colleagues are testing attitude change in a follow-up study, also using fMRI. Dr. Langleben and his colleagues in the Department of Psychiatry at the University of Pennsylvania collaborated on this study with researchers from the university's Annenberg School of Communication.



Publications, web sites

• The Alberta Centre For Active Living. Other articles on physical activities at:

The centre is supported by the Alberta Sport, Recreation, Parks & Wildlife Foundation, Alberta Tourism, Parks, Recreation and Culture, and the University of Alberta. Visit the centre's website for information and links related to physical activity:

- and different populations (e.g., children and youth, people with disabilities, women)
- in various settings (e.g., workplaces, schools)
- and chronic diseases (e.g., heart disease, diabetes, cancer)
- and other topics (e.g., walking/pedometers, mental health).

<http://www.centre4activeliving.ca/>

• American Academy of Pediatrics updates statement on the Pediatricians role in the youth violence prevention

Role of the Pediatrician in Youth Violence Prevention outlines and defines the emerging role of the pediatrician in the prevention of youth violence, outlines possible interventions that could be woven into routine health maintenance and preventive care practice, and identifies opportunities for pediatricians to assume leadership roles in violence prevention education and advocacy in community-based and out-of-office settings. The policy statement, developed by the American Academy of Pediatrics' Committee on Injury, Violence, and Poison Prevention, updates the evolving epidemiology of intentional injury, identifies important emerging issues related to violence prevention in children, and reaffirms the basic tenets that support the recommendations made in the original statement 10 years ago. Key new areas highlighted in the revised policy statement incorporate new information and resources concerning bullying and dating violence and provide further specific counseling guidance for pediatricians.

<http://pediatrics.aappublications.org/cgi/content/full/124/1/393>

• Quick Health Data Online (US)

A free health statistic database covering a range of adolescent health topics including youth eating habits and nutrition, youth milk consumption, rates of overweight/obese, rates of youth participation in physical activity or sports, rates of youth meeting recommended levels of physical activity, and more.

Quick Health Data Online is a free online database provided by the U.S. Department of Health and Human Services' Office on Women's Health. All health data on the system are provided for males and females with race and ethnicity details to enable comparisons between different population groups.

In addition to the health indicators mentioned above, the database also includes extensive state-by-state information on:

- Maternal Health
- Sexual Violence and Assault
- Mental Health
- Chronic and Infectious Diseases
- Mortality



- Access to Care
- Demographics
- Healthy People 2010 targets

<http://www.healthstatus2010.com/owh/>

• CAHR's new website is live

The Canadian Association of HIV Research is extremely pleased to present its new website. Launched on July 02, 2009, this site is dedicated to linking Canada's HIV researchers from all disciplines (basic, clinical, social and epidemiologic), as well as research trainees, HIV community leaders, government agencies, pharmaceutical manufacturers and the general public.

The new site features up-to-date news about the Association's programs and activities as well as detailed information about the annual CAHR Conference, an interactive poll, online access to CAHR's publications, an online inventory of Canadian HIV research, and more! We are particularly excited to provide several new features highlighting CAHR's highly successful 2009 Conference, including webcasts of the plenary lectures, an interactive database of all the conference abstracts. Also, if you would like to be alerted by email whenever we publish any new stories on the website, please click on the "RSS" button at the right of the address bar (at the very top of the page) and subscribe.

<http://www.cahr-acrv.ca/en/>

• August issue of Journal of Adolescent Health

This is the official Journal of the Society for Adolescent Medicine. It is published by Elsevier. Why not become a member of SAM or subscribe to the journal.

This month brings a particularly interesting collection of articles. Ellickson and her colleagues at RAND have published a study showing that the added benefit of a drug prevention program is that participants tend to exhibit much lower levels of risky sexual behavior. Jennifer Bailey at the University of Washington has contributed an editorial examining this phenomenon over a broad range of interventions. Valente and his colleagues offer a compelling brief analyzing obesity risk from a social network perspective. Jon Ellen has contributed an editorial discussing the promise of social network research among adolescents. Also on the subject of substance use, we have papers examining how the school environment influences use, why rates of use differ between U.S.-born versus immigrant Hispanic adolescents, and what smoking models tend to influence kids the most. We're also looking at how family structure affects adolescent eating behaviors, the efficacy and acceptability of computer-based screening tools for detecting relationship violence, and a still-deeper examination of the validity of self-reported data on sexual behavior and STI.

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<http://www.sciencedirect.com/science/journal/1054139X>

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