

Digital Alcohol-Exposed Pregnancy (AEP) risk Intervention optimized for Native Communities

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INTRO

- 2 million US women are at risk for alcohol-exposed pregnancy (AEP) per month.
- A nationwide pilot RCT showed CARRII, the first digital AEP intervention, significantly reduced AEP risk & pregnancy risk at 3 & 6 months, and drinking risk at 3 months, among general population women.
- CARRII should be tailored with/for Native women who may have higher AEP risk.

METHODS

Formative phase:

- Native Partners Working Group (n=5)
- Survey (n=308)
- Focus group discussions (n=41)
- Think-aloud user testing (n=13)

RESULTS

- 308 Survey respondents, ages 18-44, Native American, assigned female at birth

AEP risk	17.9%
Risky drinking	39.3%
Pregnancy risk	37.7%

DISCUSSION

- Formative testing of a Native-tailored CARRII digital intervention showed strong interest in Native tailoring, found 17.9% AEP risk in survey respondents, and identified desired intervention components.
- CARRII Native with new components will be tested in a MOST with 512 Native women with AEP risk, to identify the best combination of new components paired with the CARRII digital intervention that reduce AEP risk for Native women and communities.

Main Findings from Formative Work

1) Native Partners Working Group (WG) reviewed study components to ensure that cultural norms are considered.

2) Survey collected data on demographics, parity, literacy levels, AEP risk, drinking levels, location, preferred digital platforms, methods of access, and interest in a digital women's health study

3) Focus group discussions met to tailor intervention.
Top-ranked components:

- Mailed monthly pregnancy tests
- Automated text messages, with information on birth control, drink size, and how to reduce drinking
- Anonymous community message board of Native women

Focus group participants' comments:

Mailed monthly pregnancy test:
"Tests are hard to afford, would be super helpful before drinking."
"The privacy eliminates the embarrassment of buying one."

Automated Text Messages:
"This would work really well for youth, they're always on their phones."

Message board:
"The Native community appreciates advice and support from within the community, so keeping it Native based would be great."

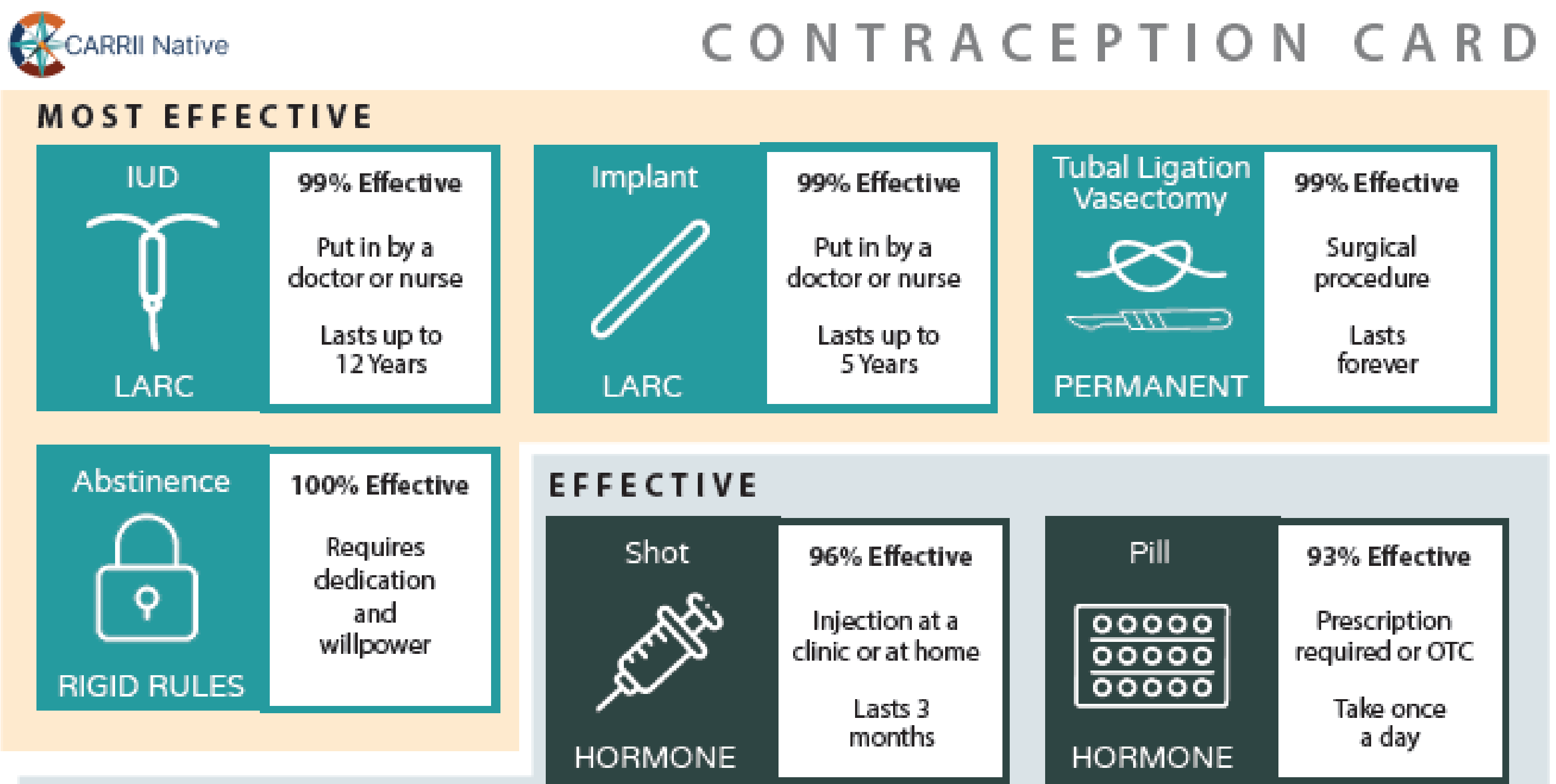
Timeline Follow Back:
"Might be hard to go backward to recall events."

Extra digital skills training:
"It would be really cool to add a chart showing baby effects from alcohol."

4) Think-aloud user testing to finalize the intervention:

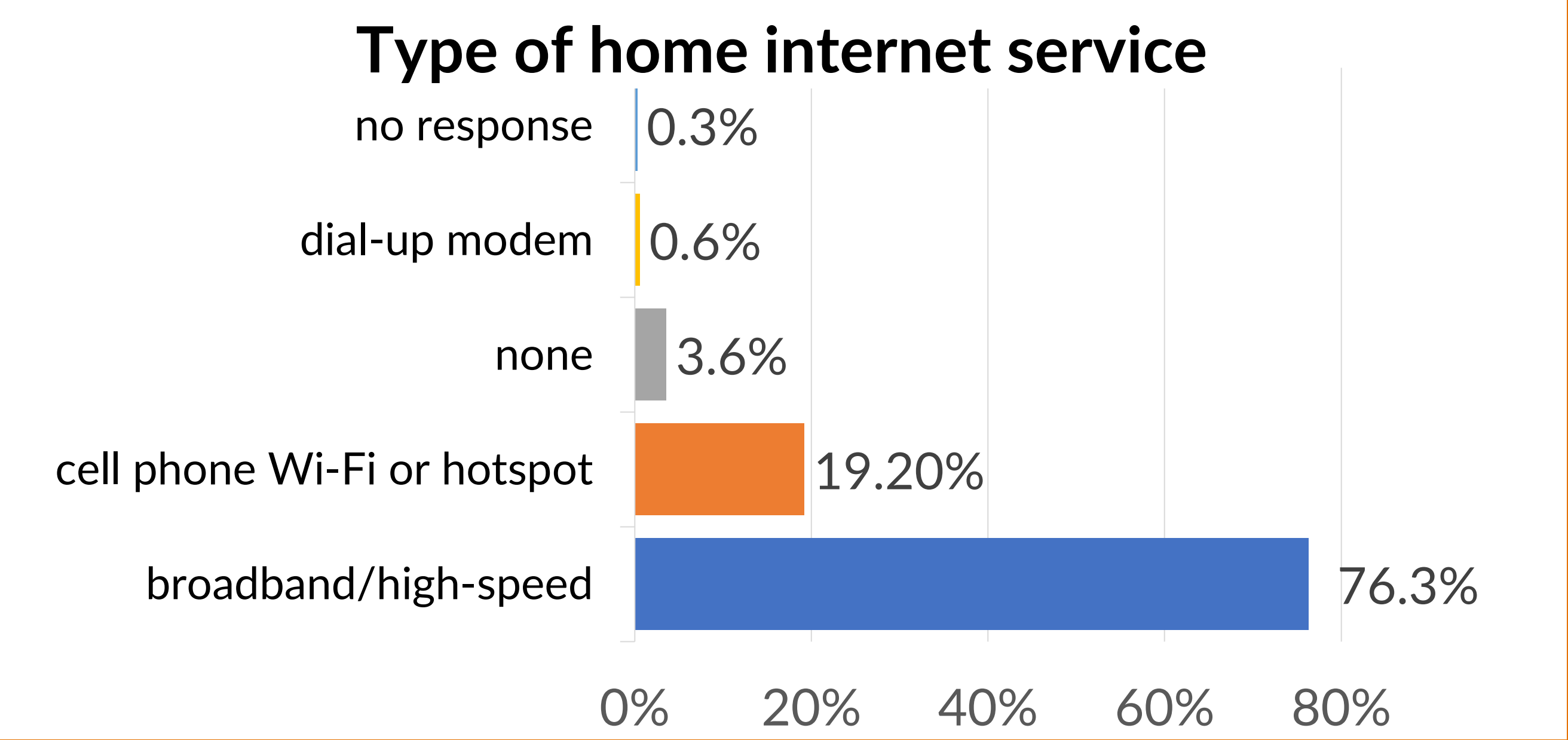
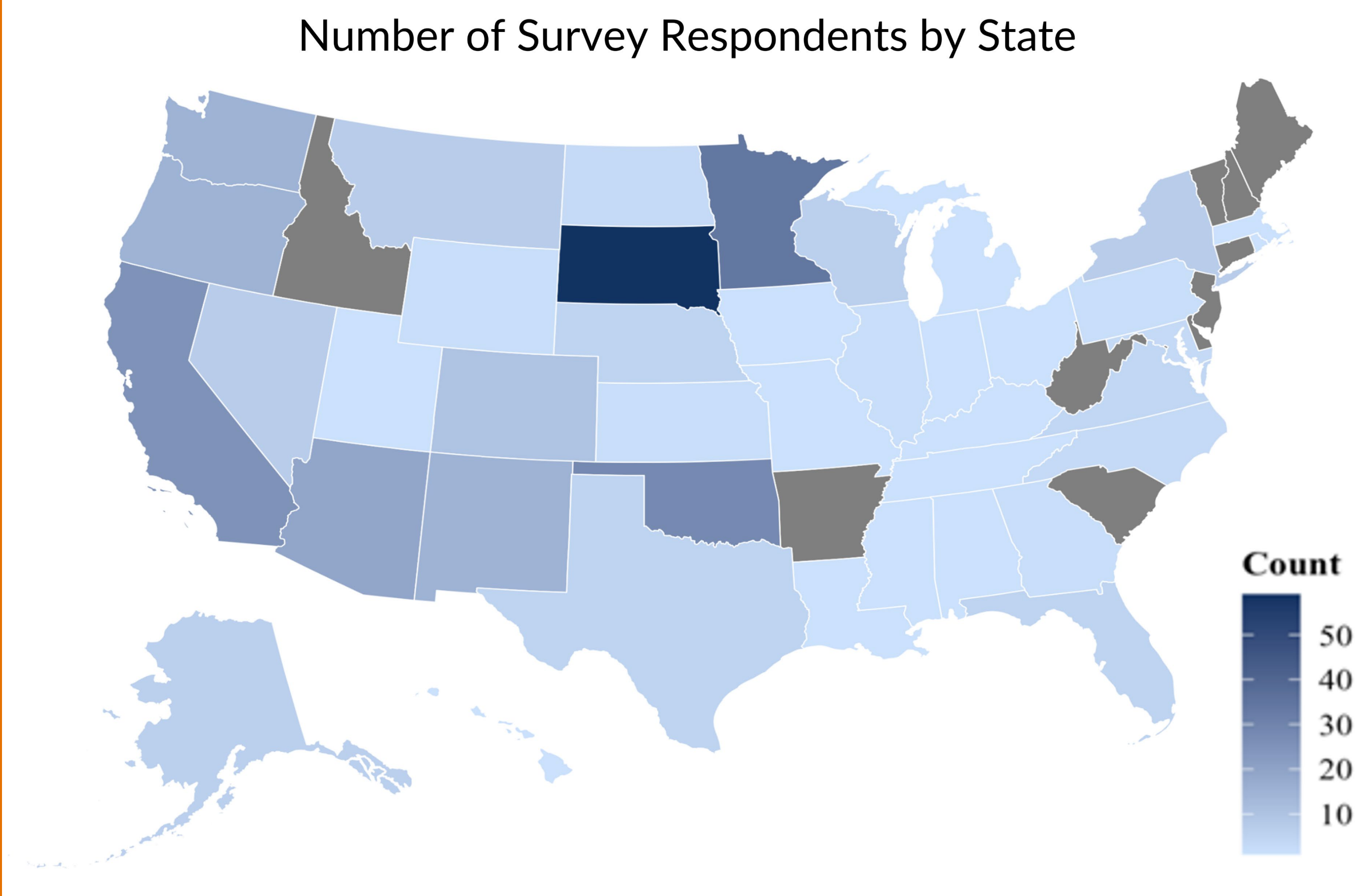
- Feedback was received in 5 main themes: general suggestions for change, positive comments, literacy information, unintentional or harmful messages, and comments specific to American Indian women.
- The feedback received allowed the target audience to take an active role in the development of intervention.

Think aloud feedback:
"I think there may be too much information regarding standard drinks/calculations?"
"Sterilization is triggering term" – resulting in removal, and use of "Permanent," in intervention Cores and on Contraception Card visual



Internet Access	
Device(s) used to access internet	
• 97.7% use mobile phones	
• 41.9% use computers	

Problems Streaming, Downloading, or Viewing Media Due to Bandwidth	
Yes	92%
No	8%
No response	1%

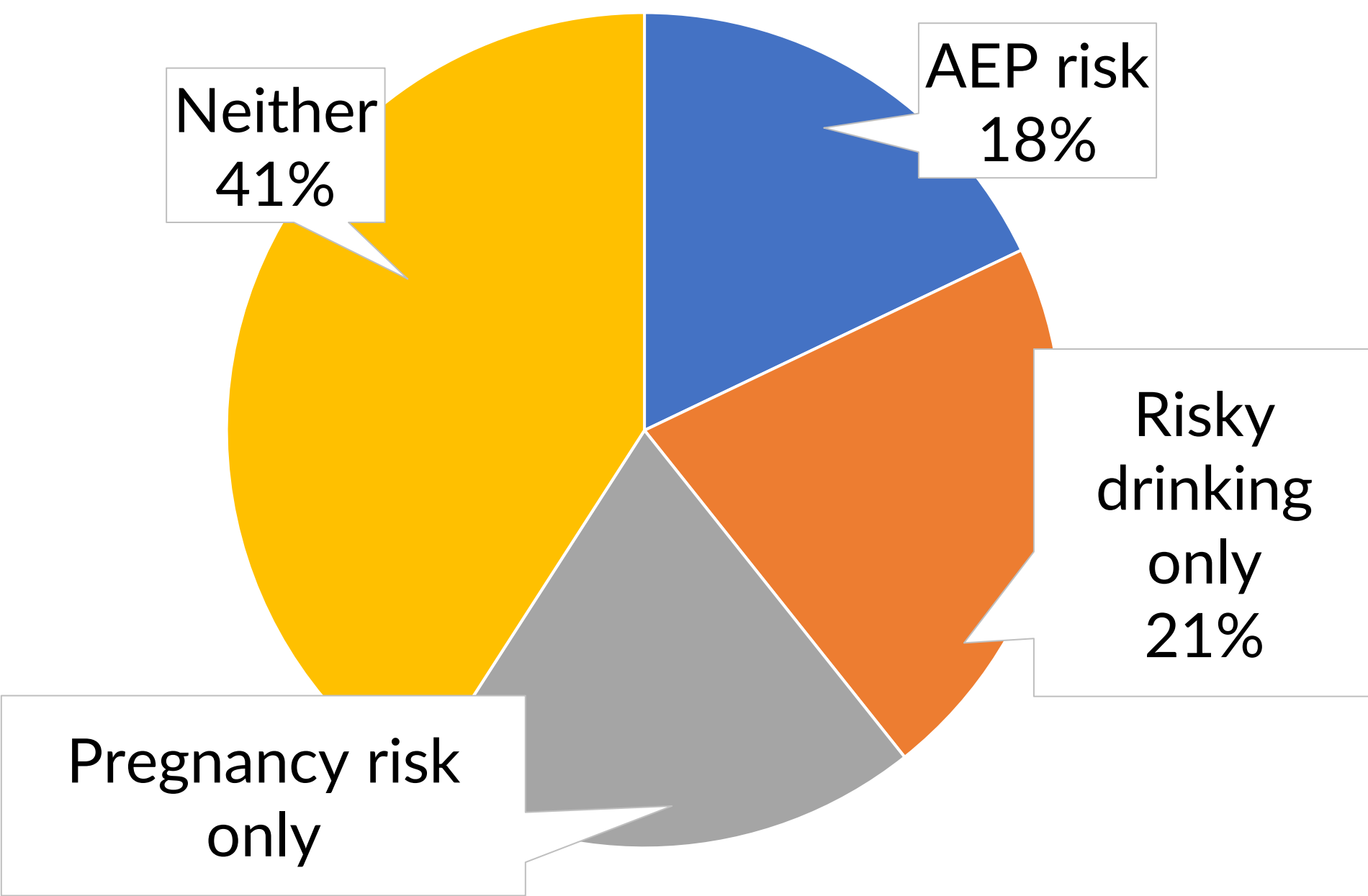


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Digital Poster with References:

Survey data results

Survey participant risk group distribution



Rate of Contraception Use with Sex, Past 90 Days

Never	57%
Sometimes	12%
Every time	30%

Contraceptive Method, if Using Every Time, Past 90 Days

IUD	24.6%
Condoms or Other Barrier Method	20.3%
Oral Contraceptive Pill	12.0%
Nexplanon	8.7%
Fertility Limiting Procedure or Condition	5.8%
Depo-Provera Shot	4.3%

Health Literacy

Problems learning about medical condition due to difficulty with written materials	
Never	50.0%
Occasionally	21.1%
Sometimes	19.2%
Often	7.1%
Always	2.3%
No response	0.3%

Highest Education Level Completed

Some College	32.79%
High School or GED	20.78%
Bachelor's Degree	11.04%
1-11th grade	11.04%

Insights and feedback from formative work are informing the development of the final intervention—a fully functional, robust Internet-based platform.