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BUE-WAIT INTERVENTION FOR CONTRACEPTIVE BEHAVIOR IN RALAMULI ADOLESCENTS FROM URBAN SETTLEMENTS IN THE CITY OF CHIHUAHUA

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INTRODUCTION

Adolescent pregnancy, referred to as "iwé bochá'game" in the Ralámuli community, is a significant global public health issue, with an overall rate of 46 births per 1,000 adolescents (PAHO and WHO, 2018). This phenomenon is particularly prevalent in lowand middle-income countries, especially among Indigenous adolescents and in rural areas, where poverty and limited access to education and healthcare exacerbate the situation (UNFPA, 2021; Gómez, 2022).

In Mexico, the birth rate varies widely, ranging from 1 to 299 births per 1,000 adolescents, and is 5.1 times higher among women living in poverty (Senado de la República, 2016). Indigenous adolescents face a 1.6 times greater likelihood of pregnancy, while those in rural areas have a 1.7 times higher probability (Guillen, 2022). In Chihuahua, the situation is alarming, with 3 pregnancies reported among 10-year-olds and 4 among 11-year-olds among indigenous adolescents (CONTEC, 2019).

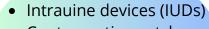
There is an urgent need to develop tailored interventions for indigenous adolescents, as addressing the unique challenges they face in preventing early pregnancy is particularly complex.

METHODOLOGY

Feasibility and acceptability study and pilot of a randomized clinical trial. The study will include adolescents aged 10 to 19 years who reside in indigenous settlements in the city of Chihuahua.

OBJECTIVE

Evaluate an educational intervention designed to develop contraceptive behavior among Ralámuli adolescents from urban settlements in the city of Chihuahua, guided by the Health **Promotion Model.**



- Contraceptive patch
- Female condoms
- Birth control pills Contraceptive injection
- Sterilization surgery
- Implant

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- Fertility calendar
- Male condom
- Hormonal ring

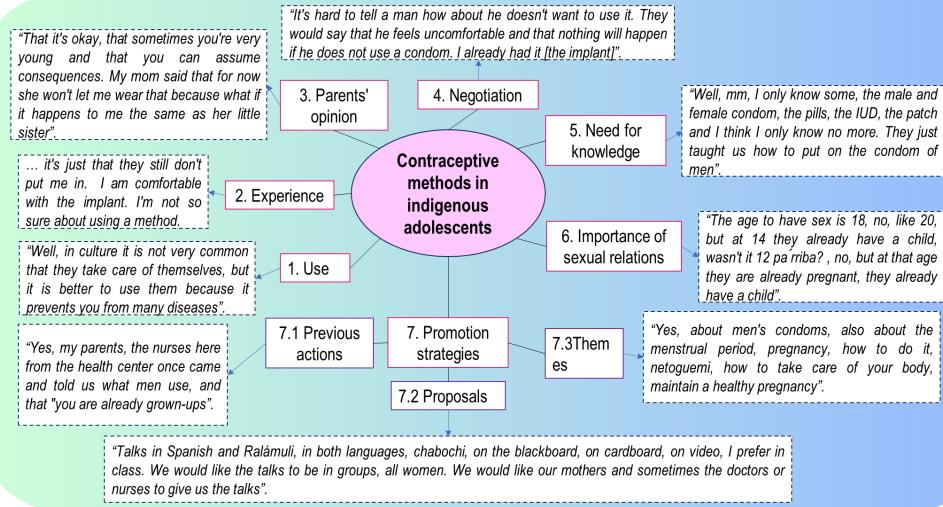


Phases for Intervention Development:

- **1. Literature review**
- 2. Draft curriculum
- **3. Qualitative phase: validation of content and materials through focus groups** with adolescents
- **4. Expert validation**
- **5.Implementation of the intervention**

The collected data will be analyzed using descriptive and inferential statistics, while qualitative data will undergo content analysis.

PRELIMINARY RESULTS, QUALITATIVE PHASE





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Adolescence stage

- What are contraceptive methods?
- Types of contraceptive methods
- Attitude towards the use of contraceptive methods

- Une'bo contraceptive methods

- Advantages and disadvantages of using contraceptive methods
- Myths about the use of contraceptive methods
- Side effects of using contraceptive methods
- Consequences of early pregnancy
- Self-efficacy for the use of contraceptive methods -Nerá unea contraceptive methods
- How contraceptive methods are used
- Negotiation of the use of contraceptive methods
- Safe sexual relations "Netogueami"

Plan for the use of contraceptive methods – Komí alí chú ena ko une

- Where to buy contraceptive methods
- When to acquire contraceptive methods
- Contraceptive use plan
- Plan for the number of children and their spacing

TECHNOLOGICAL REFLECTIONS

important considered include to It is technological tools, as well as the use of AI such as chatGPT as auxiliaries in the implementation of interventions, which can be a resource for indigenous adolescents to access information on sexual and reproductive health, which could have a significant impact. in their lives.

References

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