

# Oklahoma Healthy Youth Project 2016-2017

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## INTRODUCTION

This is the final summary report for the Oklahoma Healthy Youth Project sponsored by the Maternal and Child Health Service (MCH) of the Oklahoma State Department of Health (OSDH). The curricula available for use for State Fiscal Year July 1, 2016 – June 30, 2017 were *Making A Difference! An Abstinence Approach to Prevention of STDs, HIV and Teen Pregnancy* and *Making Proud Choices! A Safer-Sex Approach to HIV/STDs and Teen Pregnancy Prevention*. *Making a Difference* is an evidence-based curriculum that offers students the knowledge, confidence, and skills necessary to reduce their risk of sexually transmitted diseases (STDs), the Human Immunodeficiency Virus (HIV), and pregnancy by abstaining from sex. *Making Proud Choices* is an evidence-based curriculum that provides young adolescents with the knowledge, confidence and skills necessary to reduce their risk of sexually transmitted diseases (STDs), HIV, and pregnancy by abstaining from sex or using condoms if they choose to have sex. *Making Proud Choices* is based on cognitive-behavioral theories, focus groups, and the curriculum developers' extensive experience working with youth.

## METHODS

Oklahoma has one of the highest teen birth rates in the nation. In an effort to reduce teen birth rates in Oklahoma, counties with the highest teen birth rates in the state were selected to participate in the Oklahoma Healthy Youth Project. The Oklahoma Healthy Youth Project offered participating schools two evidence-based curricula from which to choose: *Making a Difference (MAD)* and *Making Proud Choices (MPC)*. Prior to curriculum implementation in the classroom, each Adolescent Health Specialist received permission from school administration to offer the curriculum. The Adolescent Health Specialists provided the schools with consent forms to send home to the parent(s)/guardian(s) outlining the purpose and scope of the curriculum. Additionally, the Adolescent Health Specialists held parent night meetings in the community at which parents could view the curriculum materials and have any questions or concerns addressed. Copies of the proposed curriculum were made available for review. In addition to the curriculum, the Adolescent Health Specialists would administer an Entry Survey

prior to the first curriculum module and an Exit Survey after the last curriculum module. The parent(s)/guardian(s) could choose whether or not their child could participate in the project as well as the entry and exit surveys. Additionally, the student could choose to not complete either survey, skip survey questions that made them feel uncomfortable, or stop participating at any time during the project.

### **Entry and Exit Surveys**

Program participants were given an Entry Survey prior to curriculum instruction and an Exit Survey after curriculum instruction. Due to the sensitive nature of some of the questions, only students in grades 9-12 were given the Entry Survey. All students, regardless of age or grade, were given the Exit Survey. Participation in the Entry and Exit Surveys was voluntary. The Entry Survey consisted of 16 questions, which collected demographic information, sexual orientation, and sexual behaviors related to unintended pregnancy and sexually transmitted diseases. The Entry Survey was given prior to curriculum implementation. The Exit Survey consisted of 10 questions, which collected demographic information, intentions of future sexual behavior, and program efficacy. The Exit Survey was given at the conclusion of curriculum implementation and only if all curriculum modules were completed.

### **Program Participants**

The curricula were implemented in 15 schools and 1 community-based organization. There were 940 participants that attended at least 1 program session, 816 (87%) of which attended 75% or more of the program sessions (Table 1). Of the 816 participants who attended at least one program session, 478 (73%) were presented the MAD curriculum and 23 (27%) were presented the MPC curriculum.

**Table 1. Program Participants by Curriculum: Oklahoma Healthy Youth Project 2016-2017**

Curriculum	Number of Participants	
	Attended at Least One Session	Attended at Least 75% of Program Sessions
Making A Difference	706	593
Making Proud Choices	234	223
<b>Total</b>	<b>940</b>	<b>816</b>

Only 198 participants completed the Entry Survey (Table 2). This number may be low compared to the totals in Table 1 due to the following: students or their parents opting out of completing the survey; the survey not being offered to some participants due to being middle school aged in a non-school setting; or due to students being absent on the day the survey was given.

Among those who completed the Entry Survey, 53% were male and 47% were female. Nearly one-third were in the 8<sup>th</sup> grade (32.8%), followed by the 10<sup>th</sup> grade (27.8%), 12<sup>th</sup> grade (21.7%), and 11<sup>th</sup> grade (10.5%). Nearly half of the participants were White (49.7%), followed by Hispanics (32.5%), Black or African Americans (7.1%), and persons of Multiple Races (5.6%). Six hundred and eighty six program participants completed the Exit Survey, among which more than half were male (52.8%) and 47.2% were female. Middle school students comprised the majority of program participants with 44.8% in the eighth grade and 35.5% in the seventh grade. Whites made up just over half of participants at 54.5%, followed by Hispanics (23.1%), Native Americans (10.1%), persons of Multiple Races (6.2%), and Black or African Americans (4.8%).

**Table 2. Demographic Characteristics of Participants:  
Oklahoma Healthy Youth Project 2016-2017**

Demographic Characteristic	Entry Survey		Exit Survey	
	n	%	n	%
<b>Gender</b>				
Male	105	53.0	360	52.8
Female	93	47.0	322	47.2
<i>Missing</i>				
<b>Grade</b>				
6 <sup>th</sup>	-	-	-	-
7 <sup>th</sup>	-	-	243	35.5
8 <sup>th</sup>	65	32.8	307	44.8
9 <sup>th</sup>	10	5.1	20	2.9
10 <sup>th</sup>	55	27.8	51	7.4
11 <sup>th</sup>	20	10.1	21	3.1
12 <sup>th</sup>	43	21.7	42	6.1
Other				
<i>Missing</i>			1	
<b>Race/Ethnicity</b>				
Asian/Pacific Islander	-	-	-	-
Black	14	7.1	31	4.8
Hispanic	64	32.5	149	23.1
Multiple Races	11	5.6	40	6.2
Native American	-	-	65	10.1
White	98	49.7	351	54.5
<i>Missing</i>	1		42	
<b>Total</b>	<b>198</b>	<b>100.0</b>	<b>686</b>	<b>100.0</b>

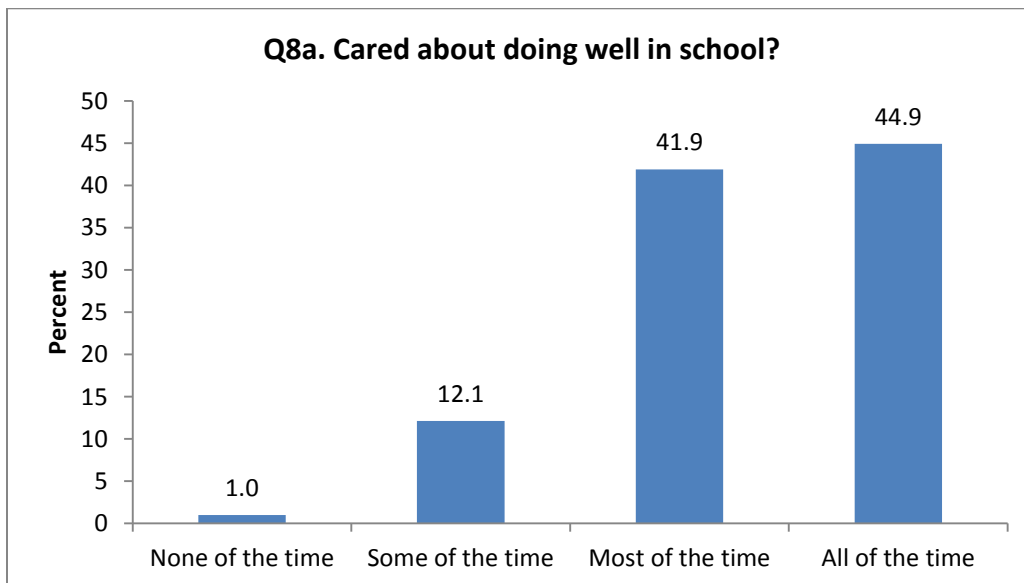
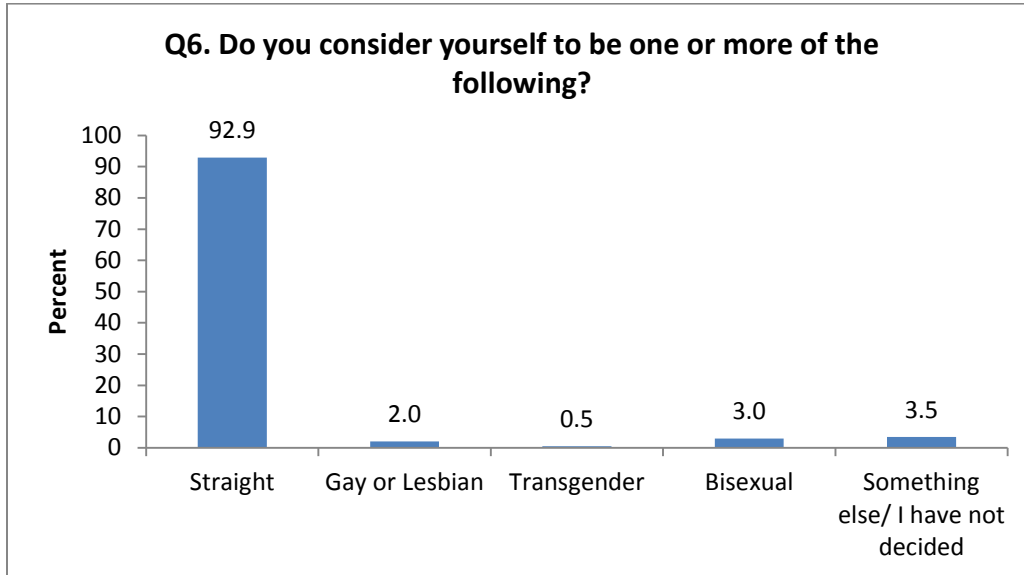
(-) Data not shown due to small numbers

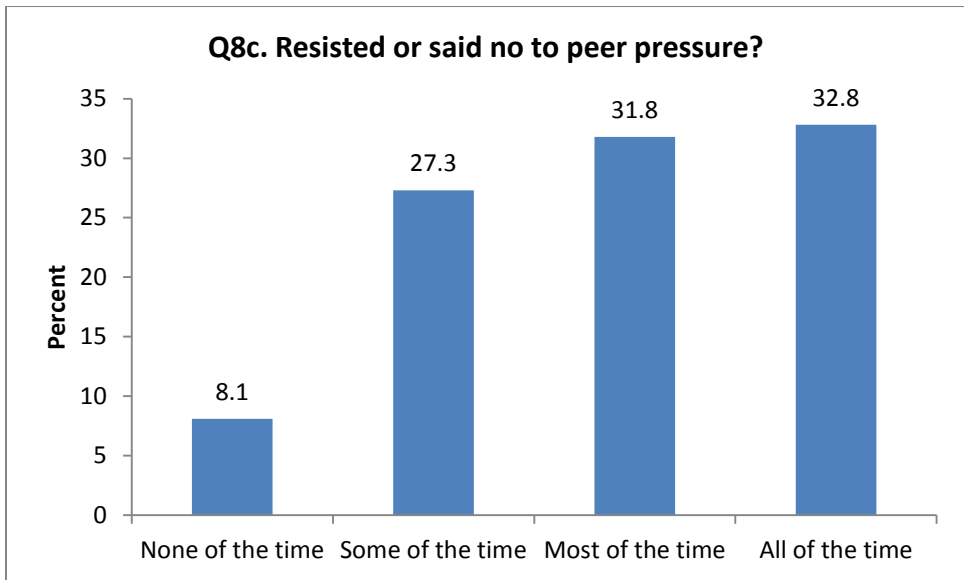
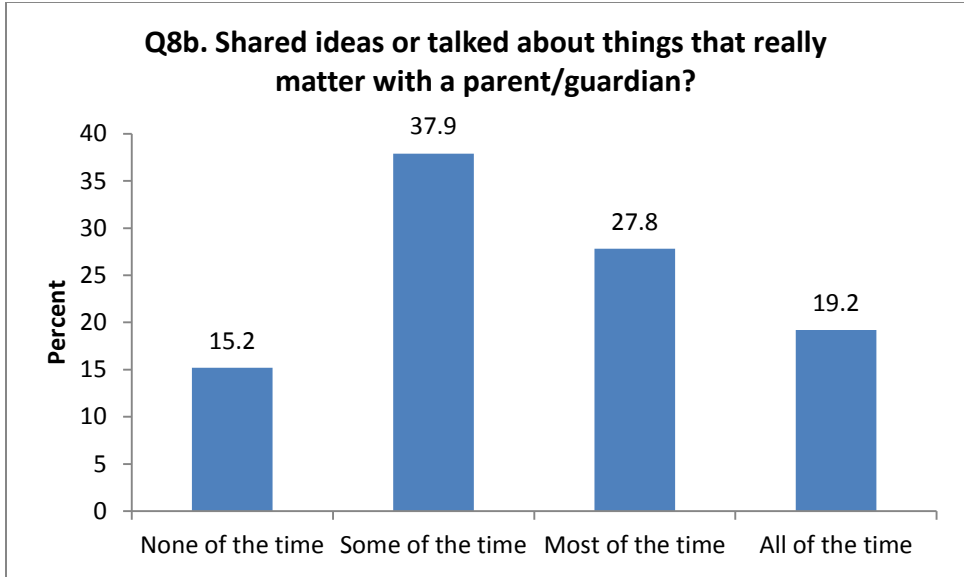
Other grade includes high school graduate, GED, obtaining GED, or drop out

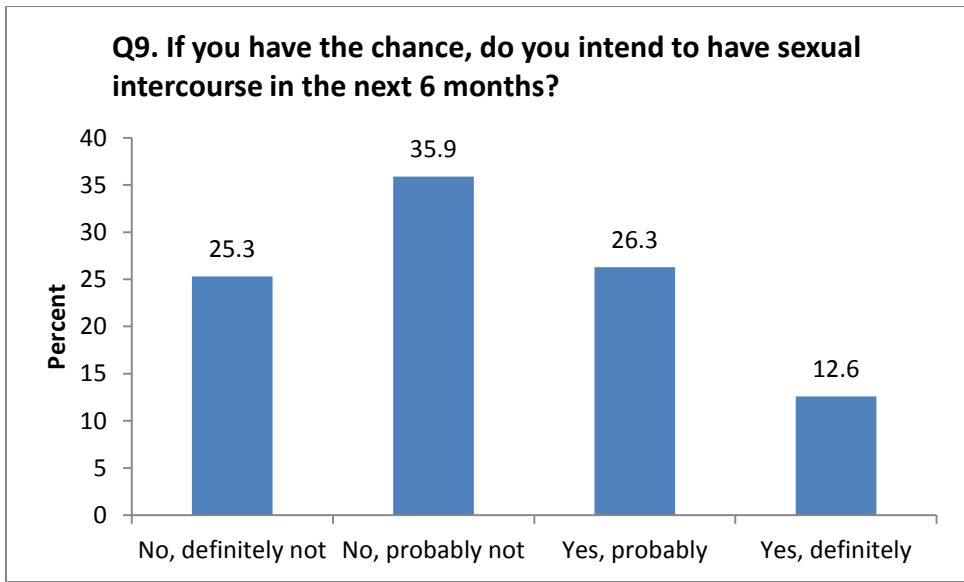
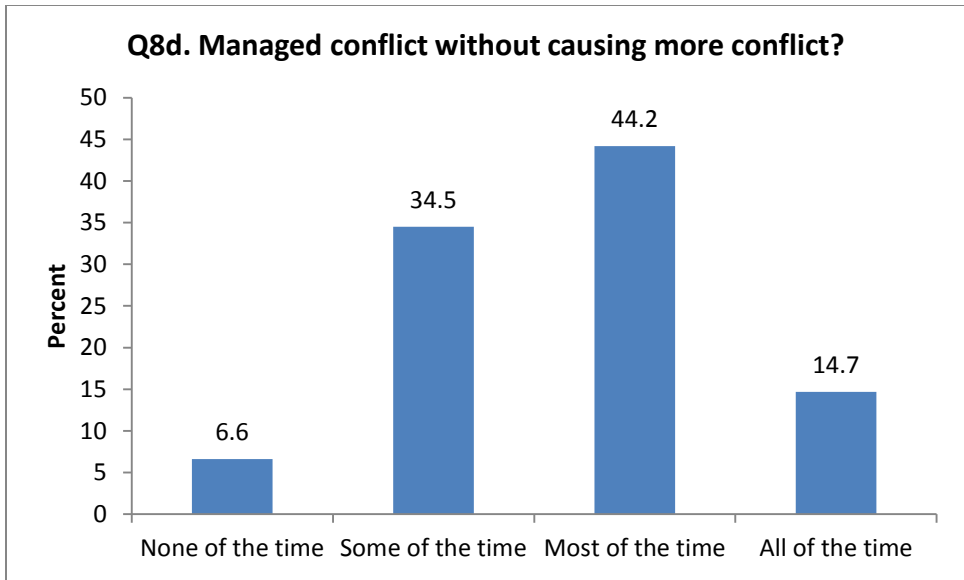
## RESULTS

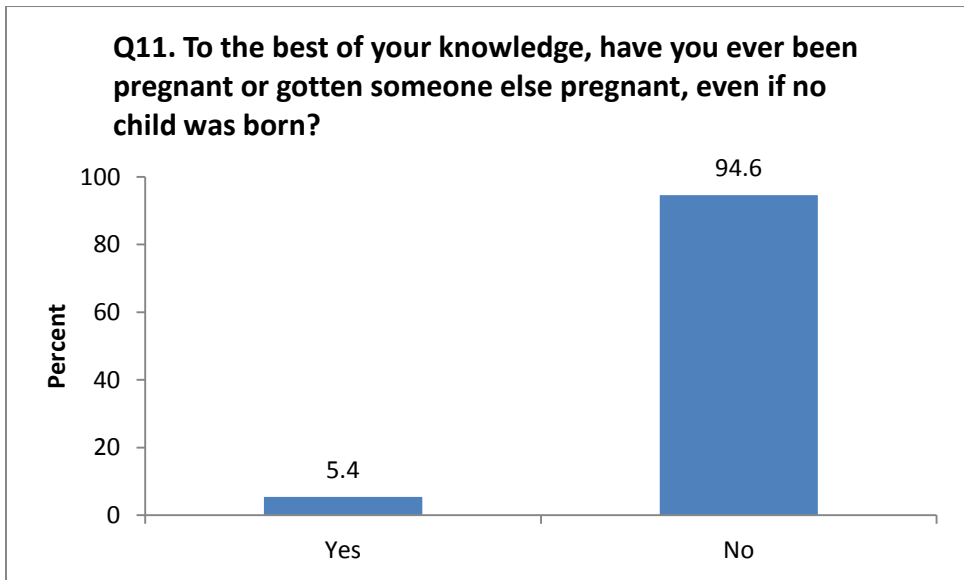
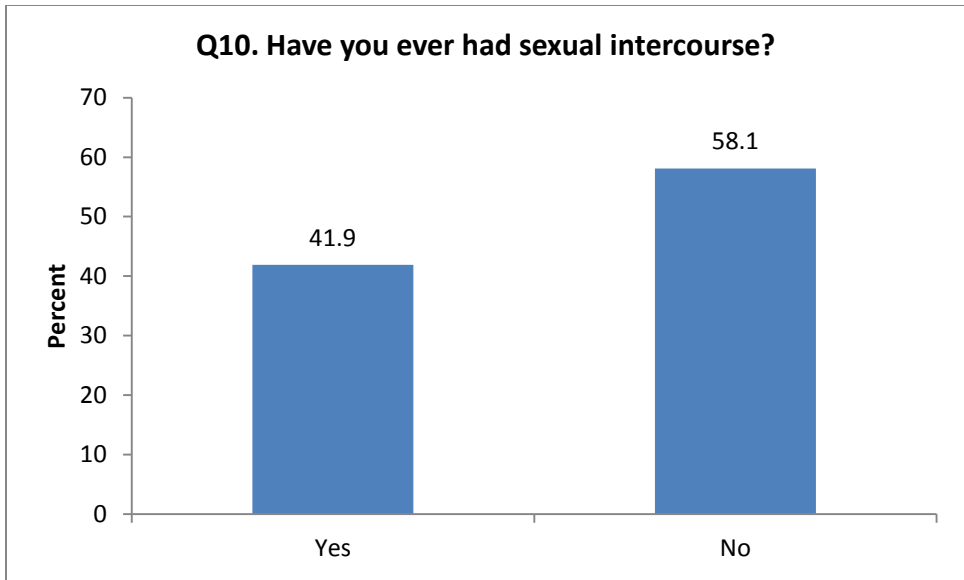
The following results are from the Entry Survey. The questions in each figure were worded from the survey participant's perspective. Results for questions 1-5 and 7 are given in Table 2.

Percentages for Question 6 will not total 100% since participants are allowed to choose more than one response.

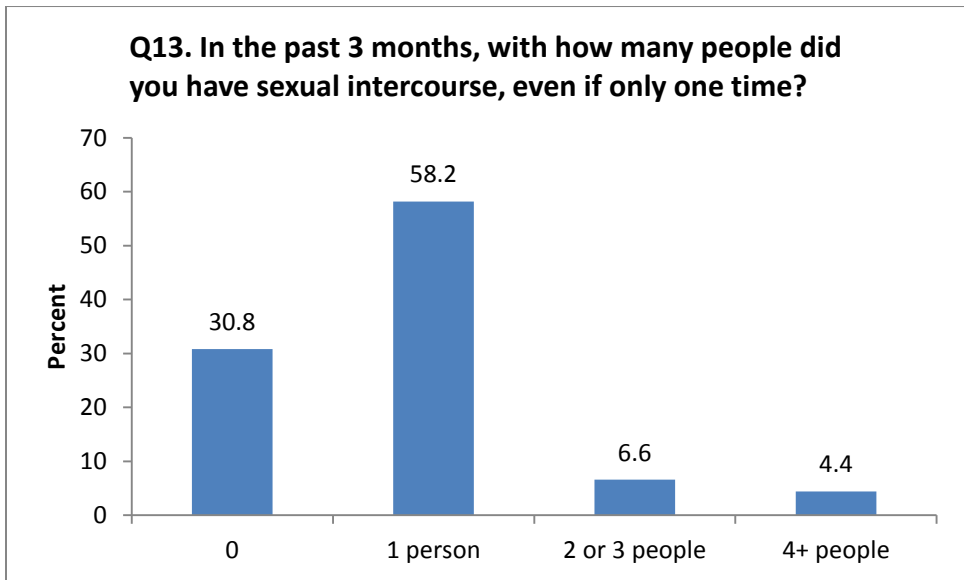
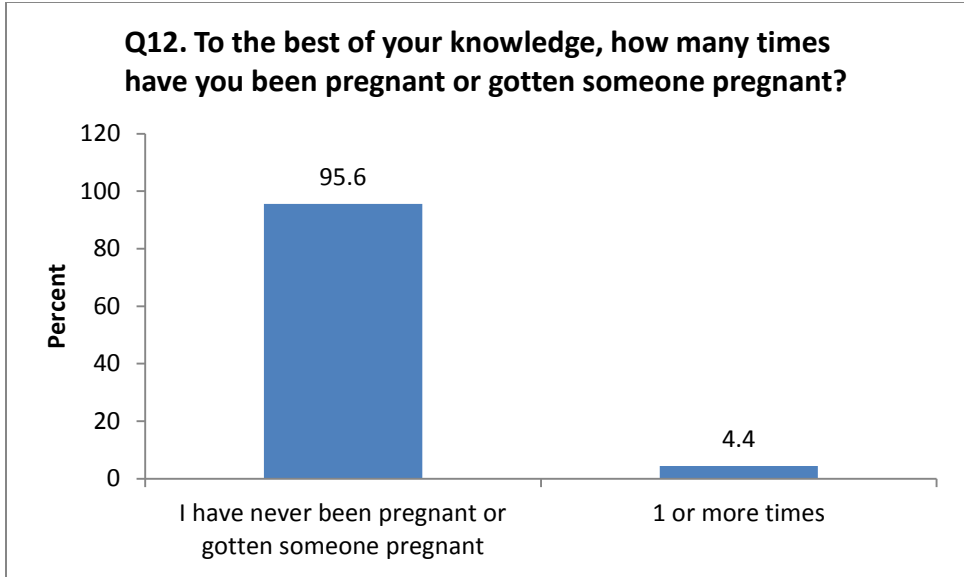


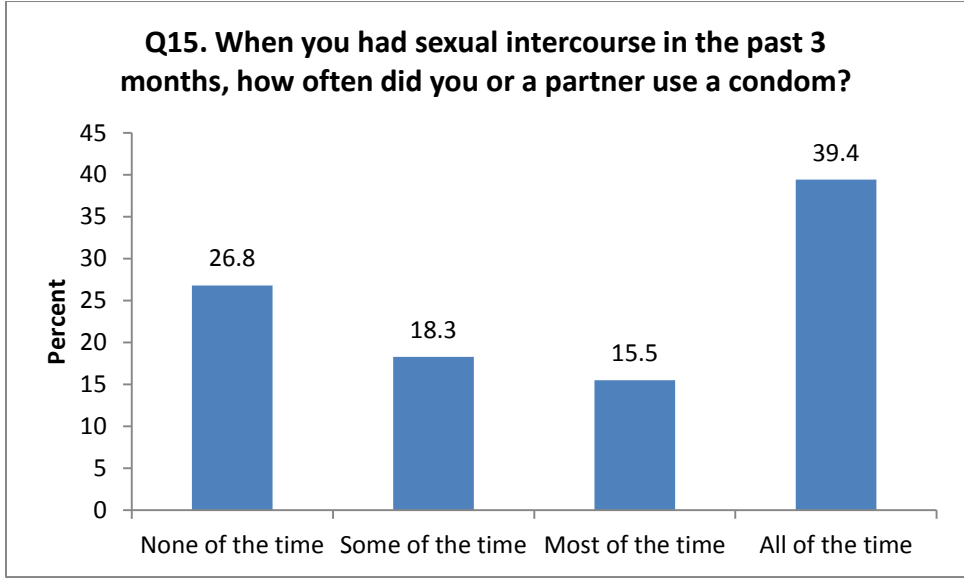
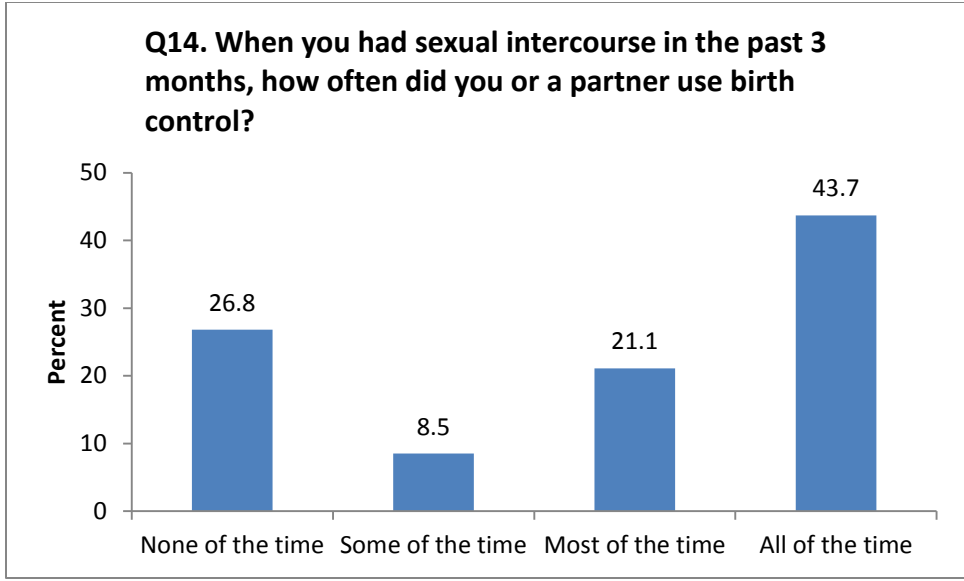


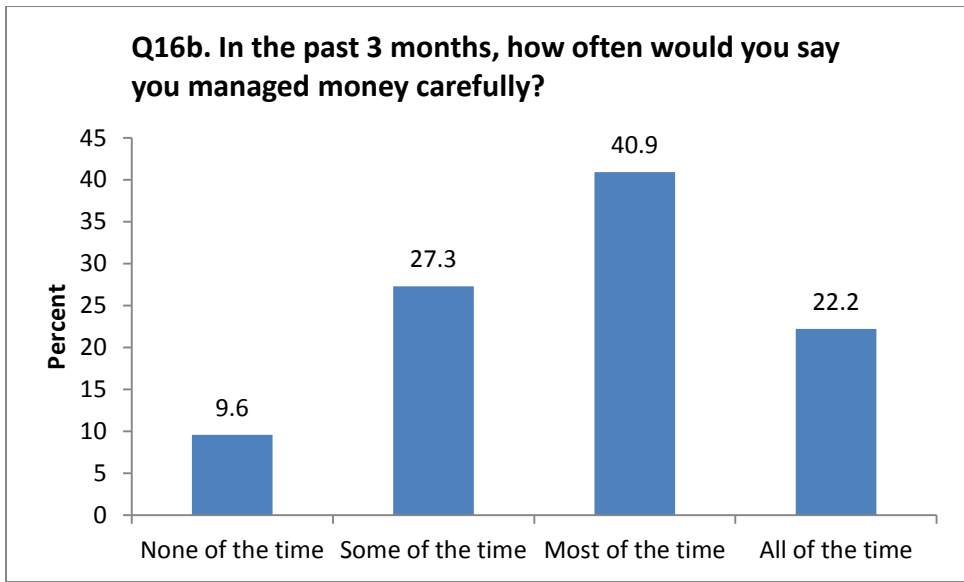
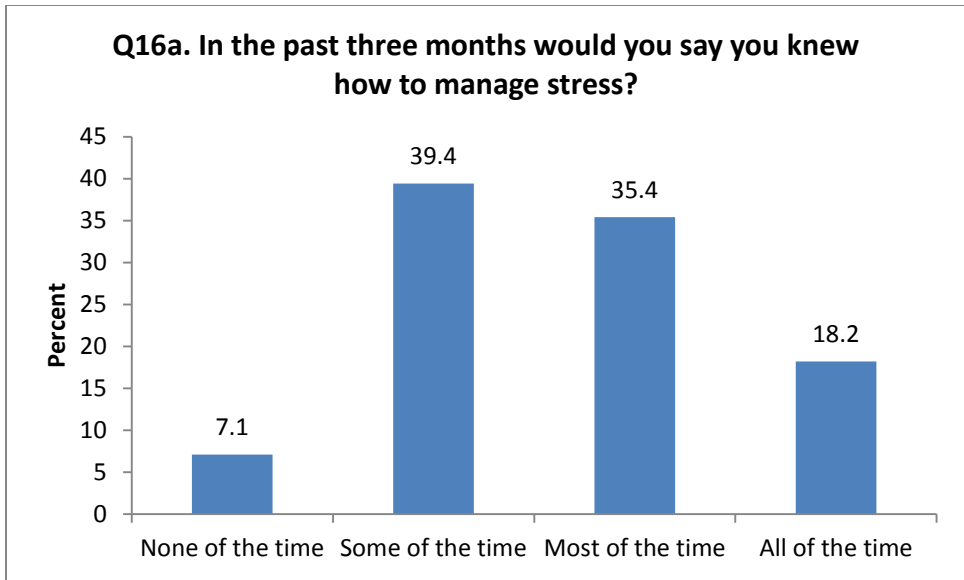


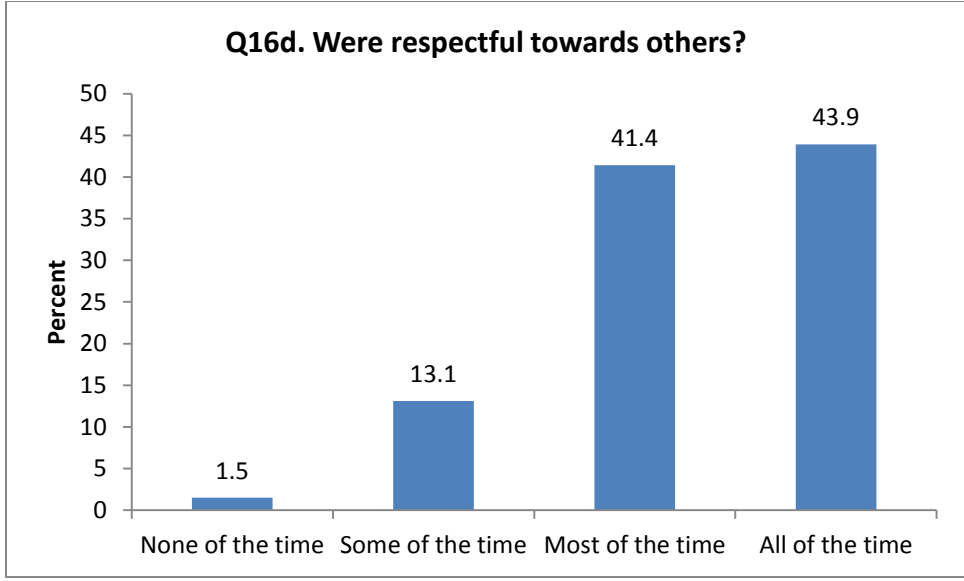
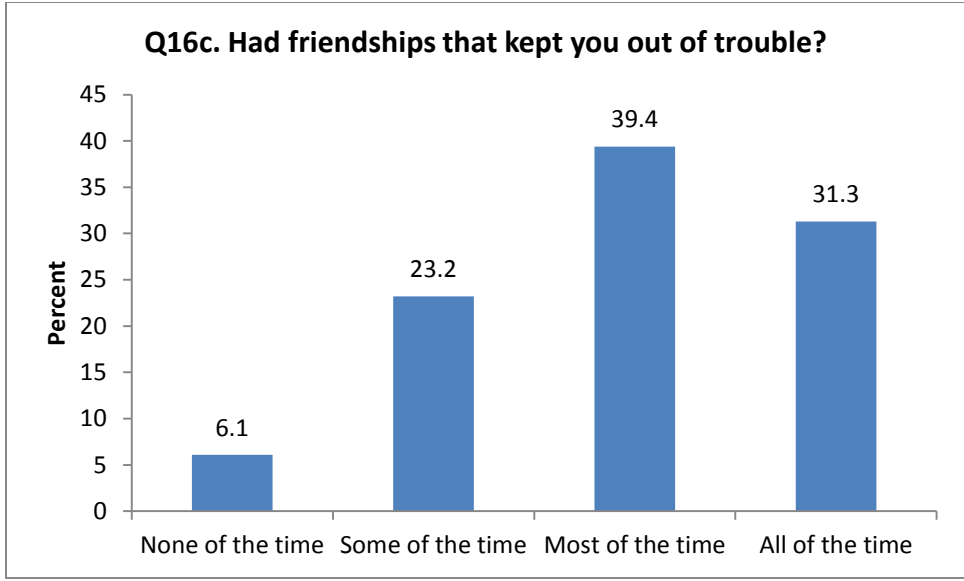




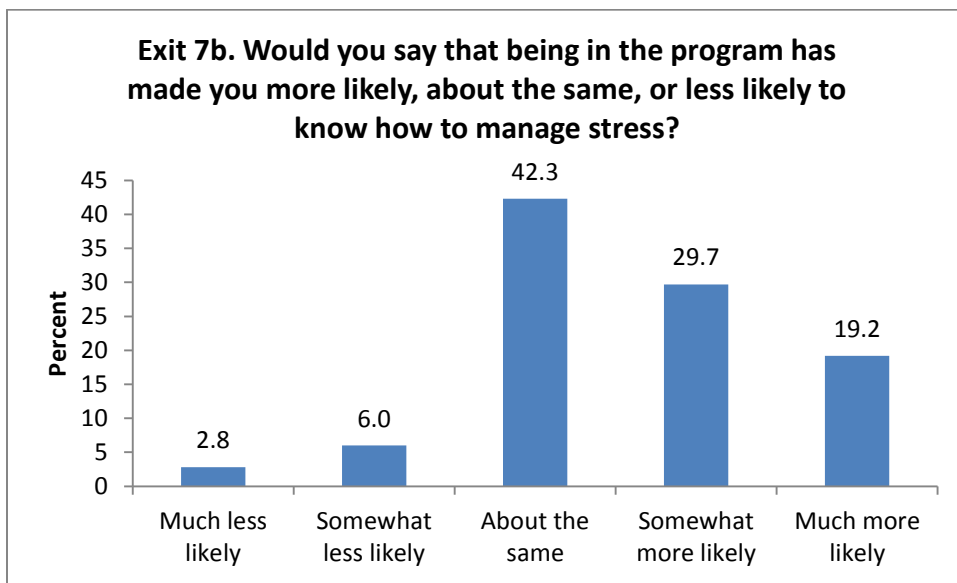
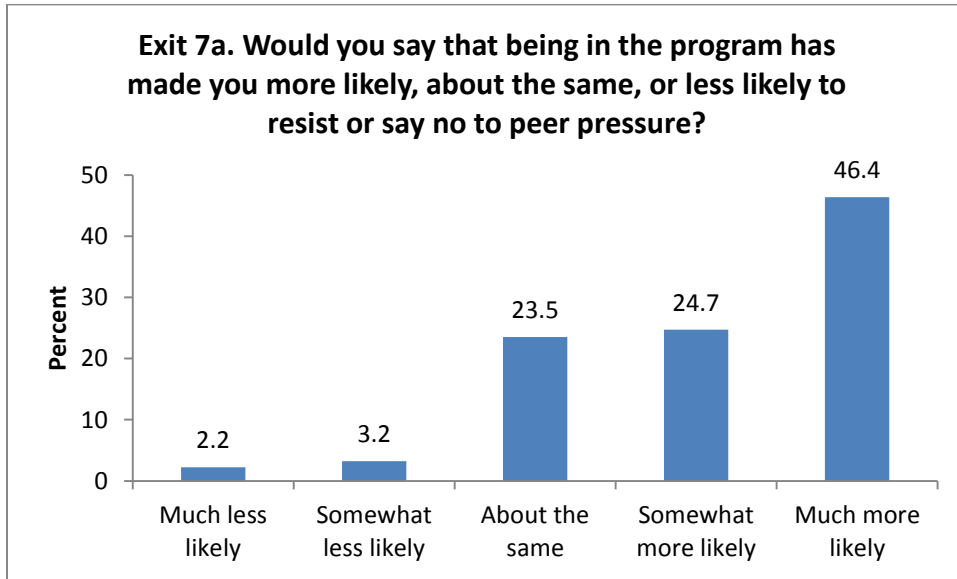


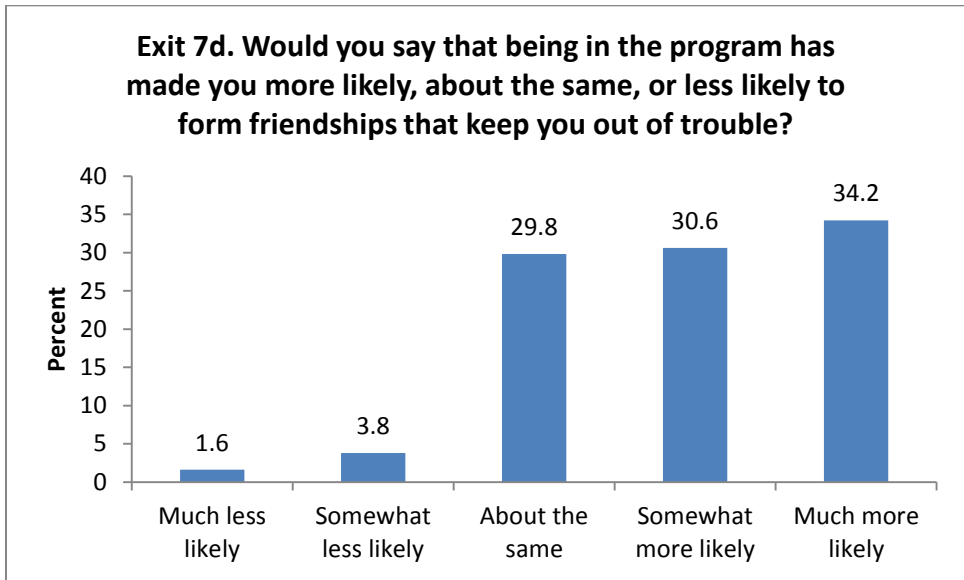
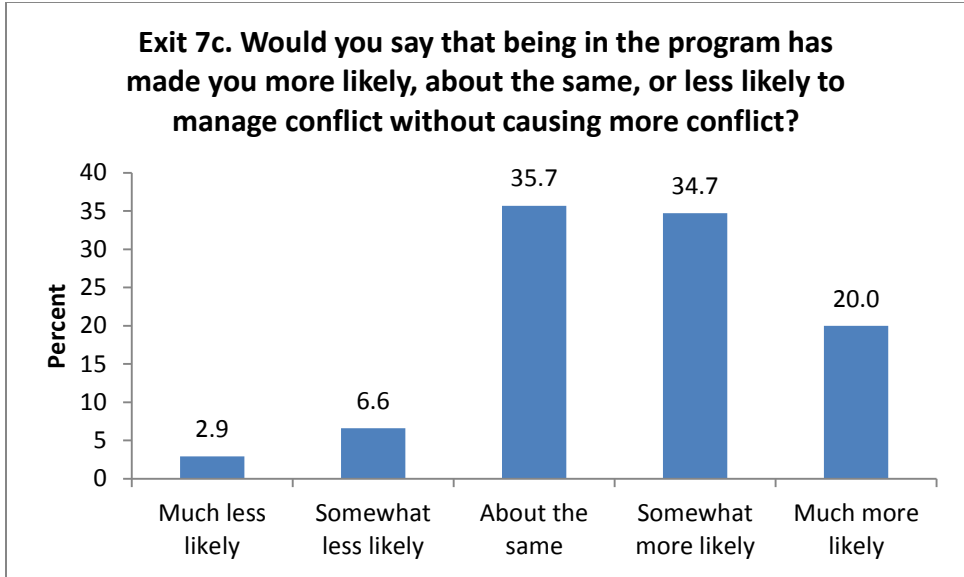


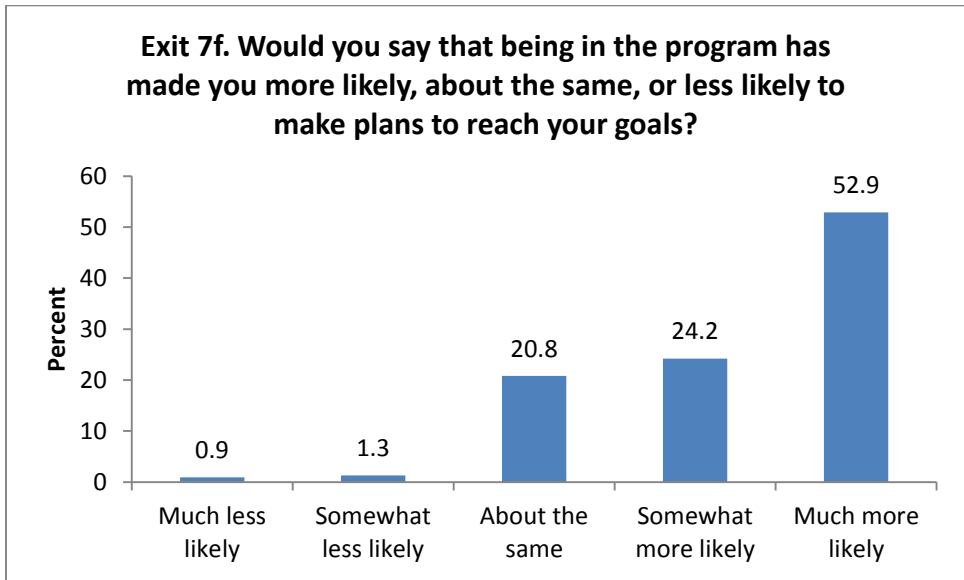
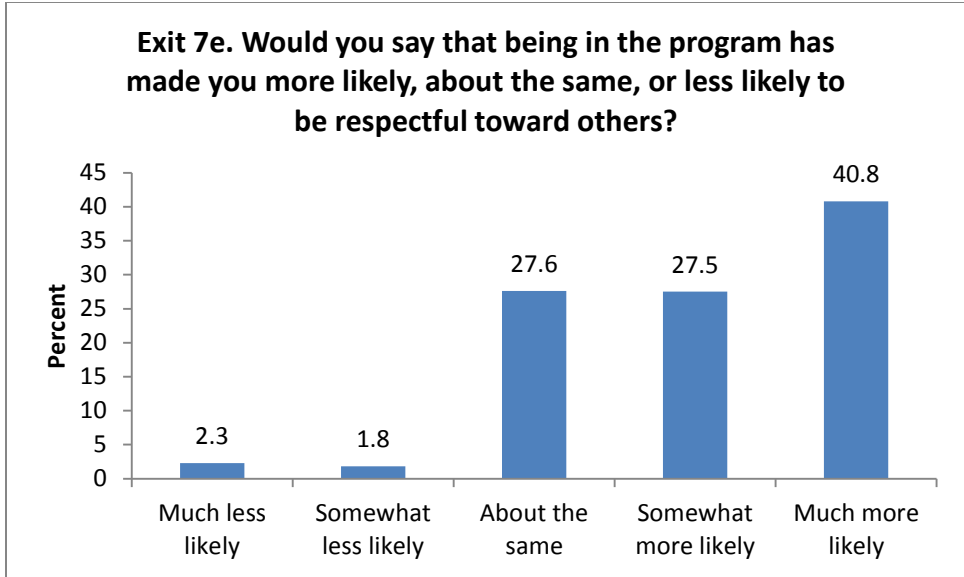


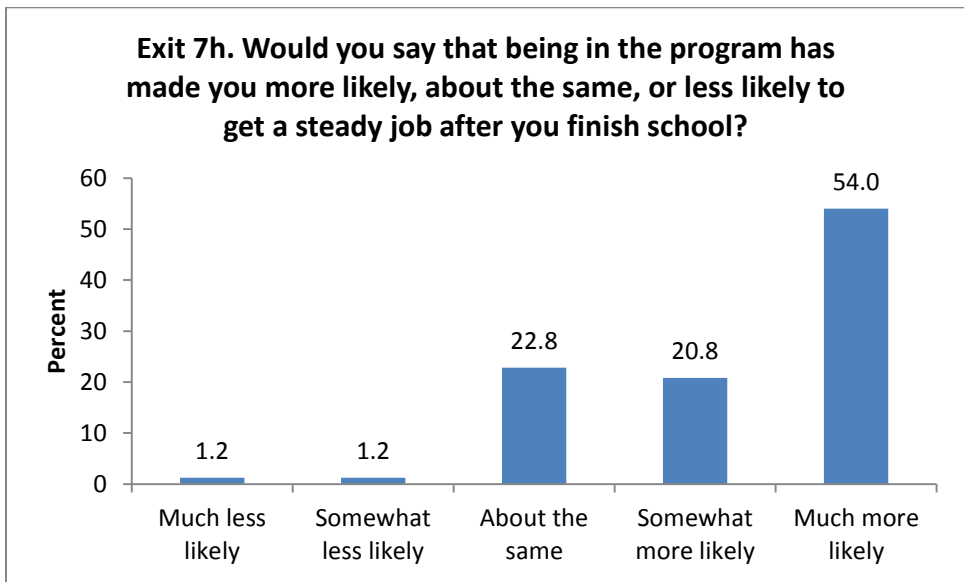
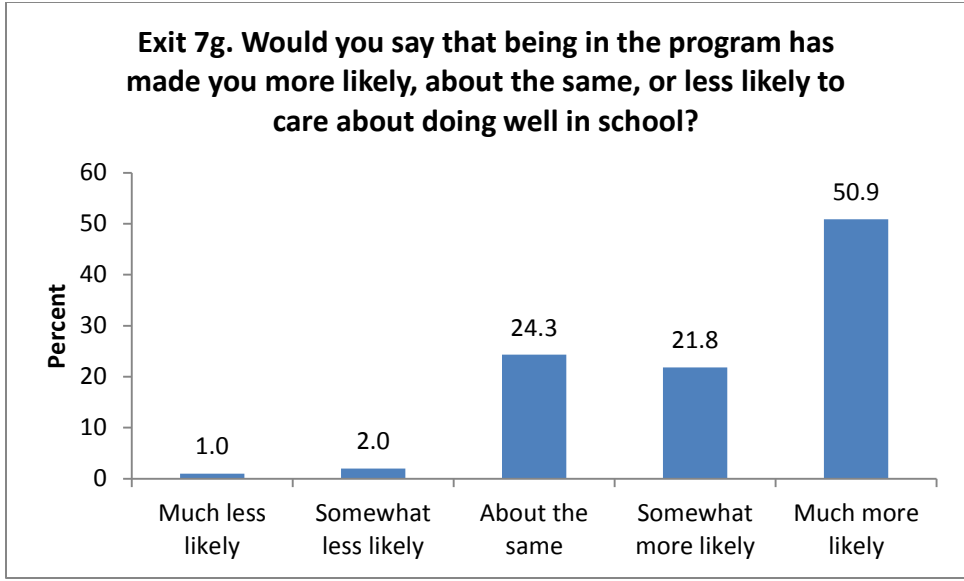


The following are the results from the Exit Survey.



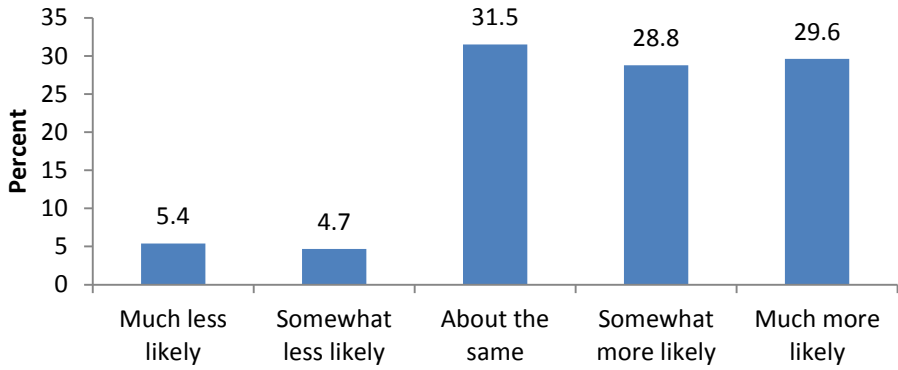




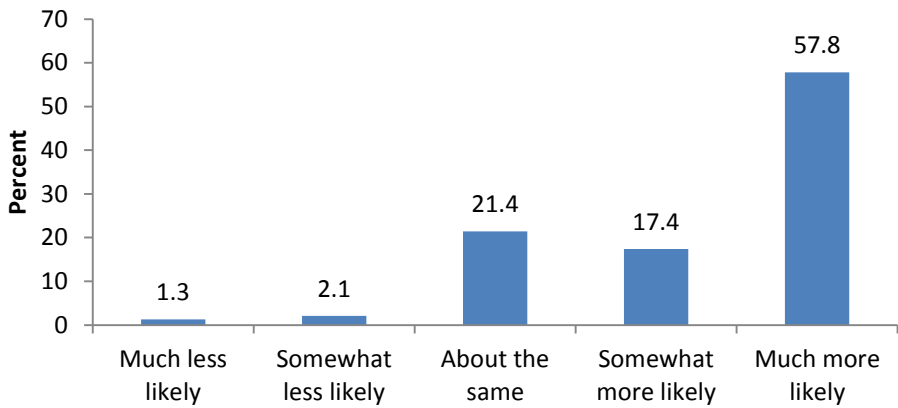


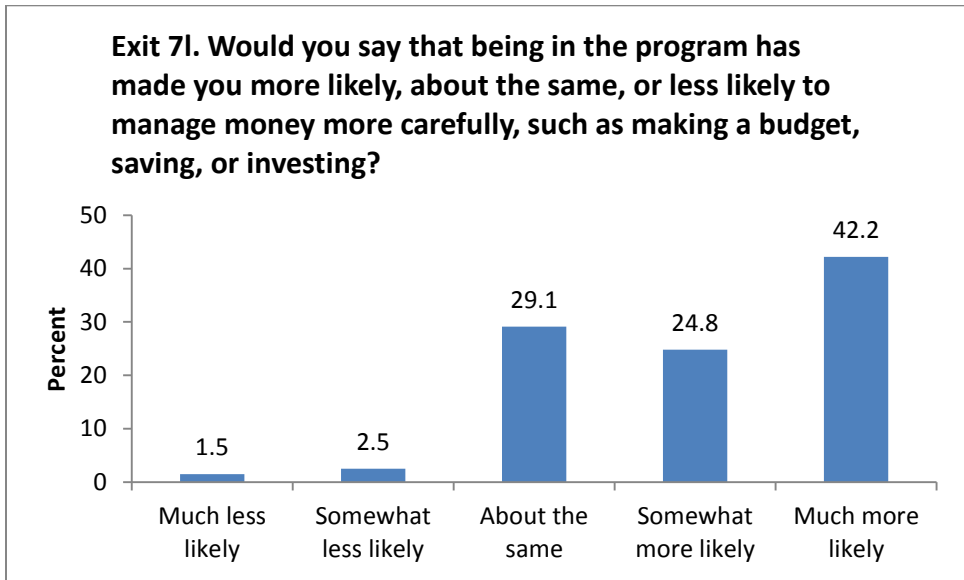
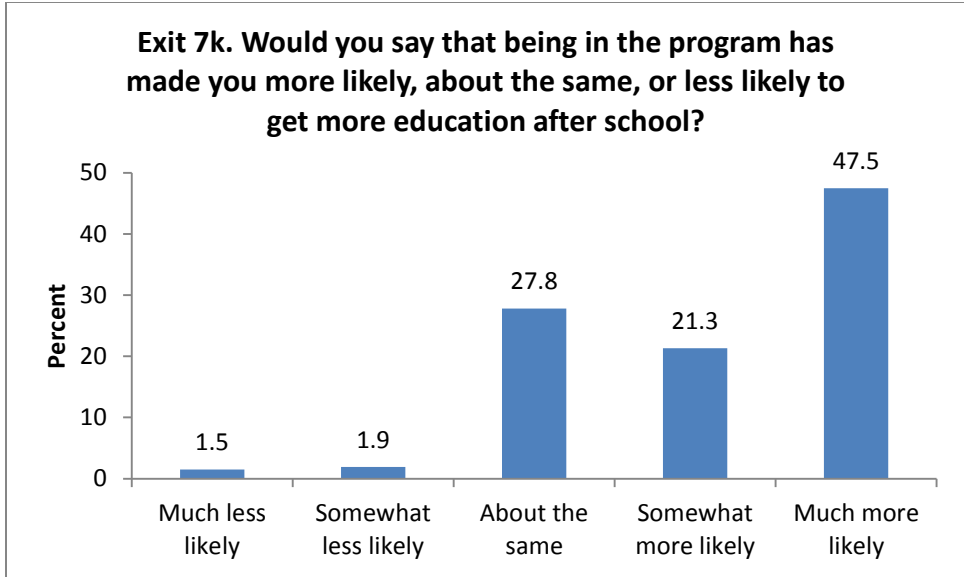


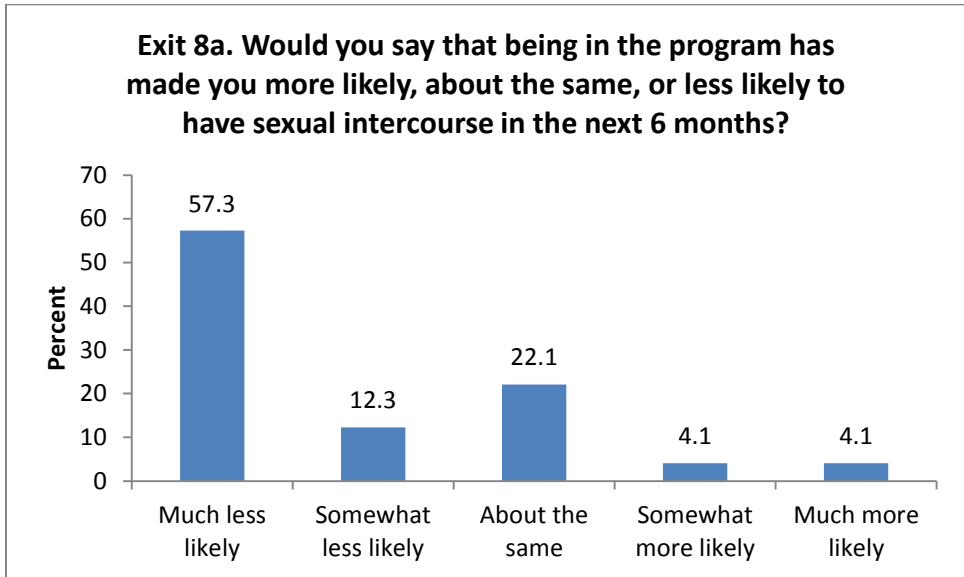
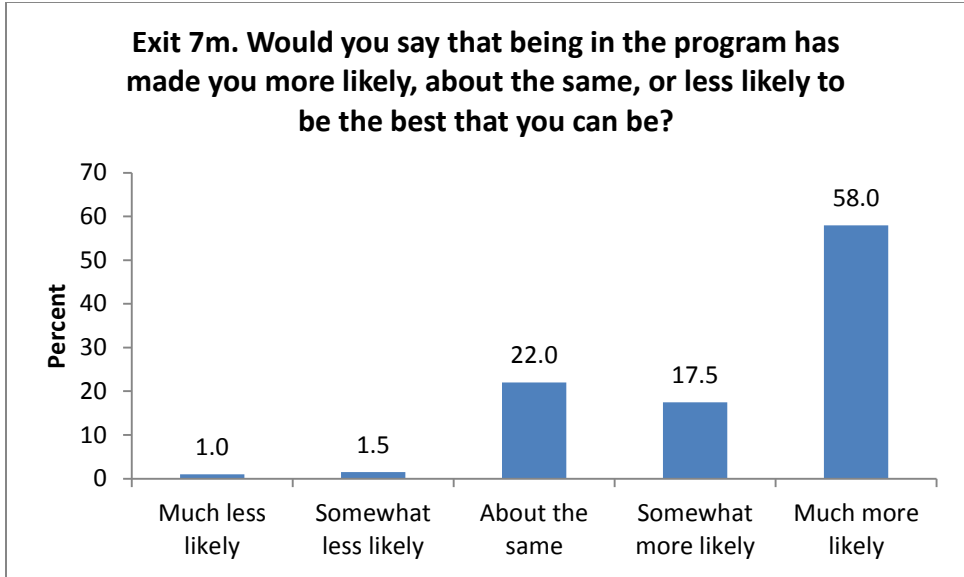
**Exit 7i. Would you say that being in the program has made you more likely, about the same, or less likely to share ideas or talk about things that really matter with a parent/guardian?**



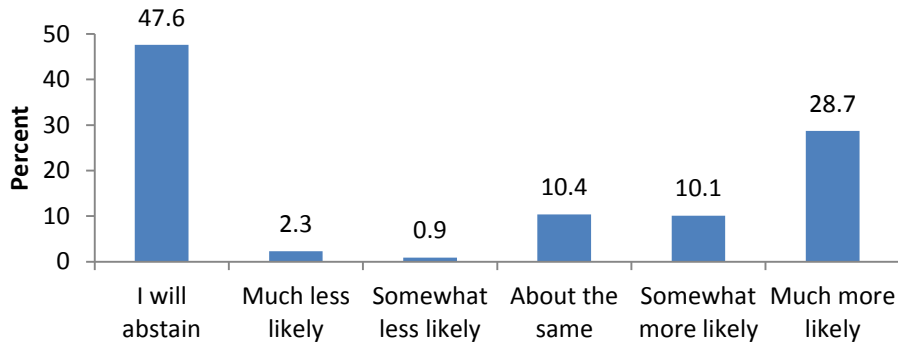
**Exit 7j. Would you say that being in the program has made you more likely, about the same, or less likely to make healthy decisions about drugs and alcohol?**



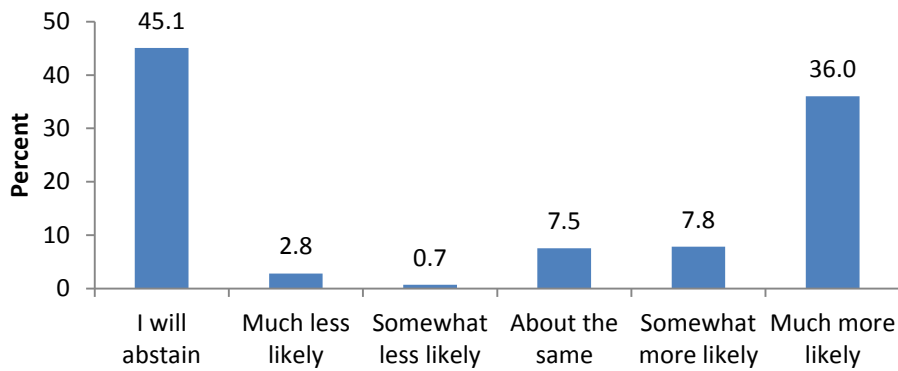




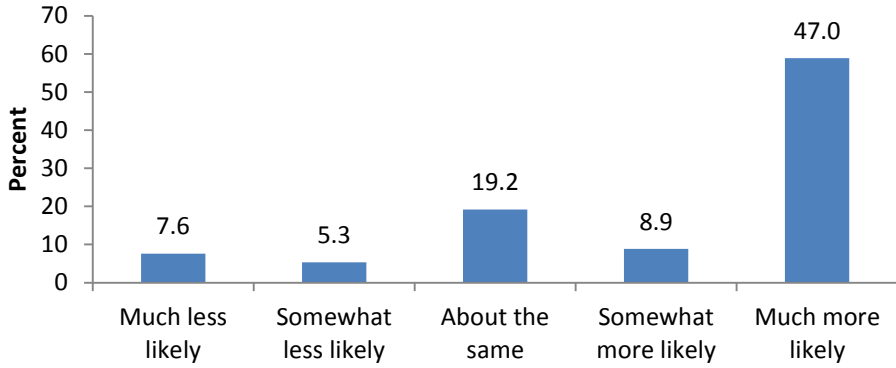
**Exit 8b. Would you say that being in the program has made you more likely, about the same, or less likely to use or ask your partner to use any method of birth control, if you were to have sexual intercourse in the next 6 months?**



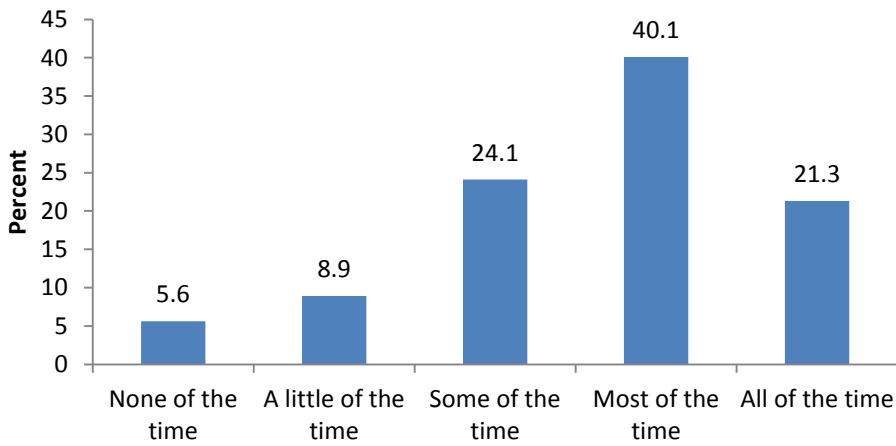
**Exit 8c. Would you say that being in the program has made you more likely, about the same, or less likely to use (or ask your partner to use) a condom if you were to have sexual intercourse in the next 6 months?**

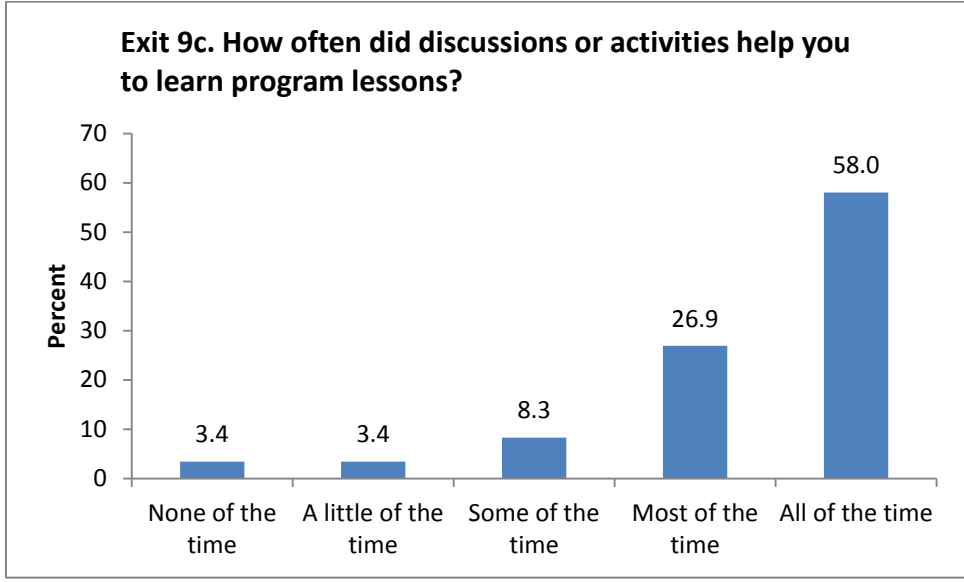
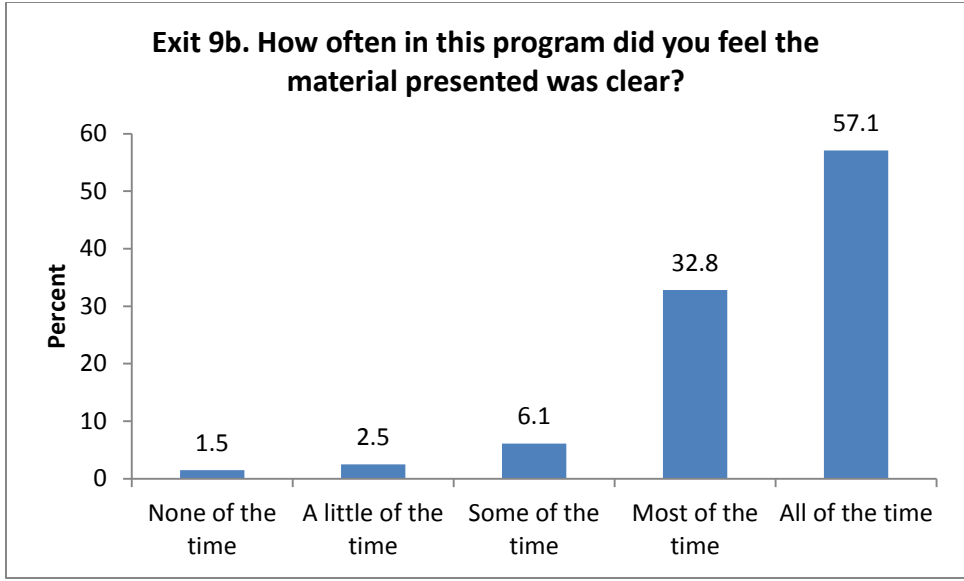


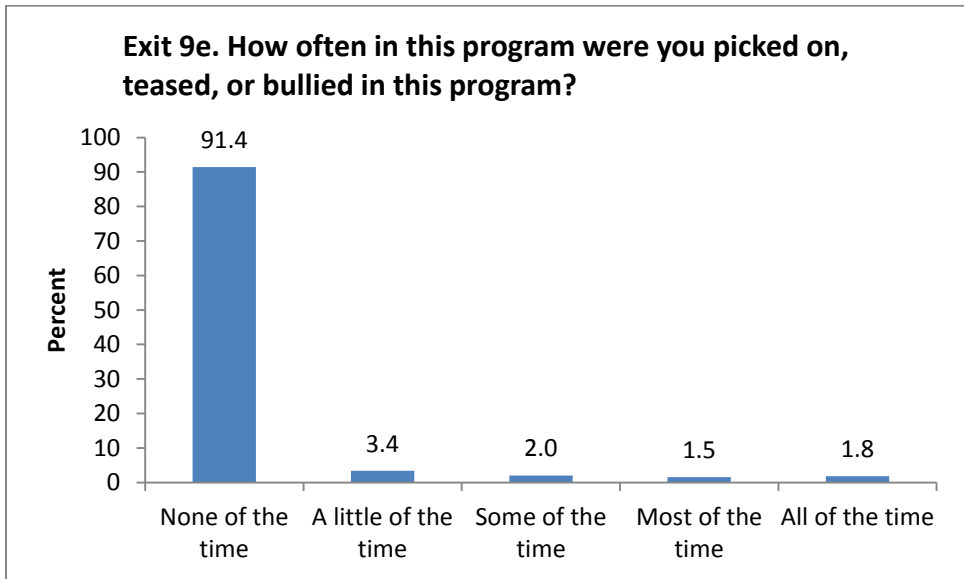
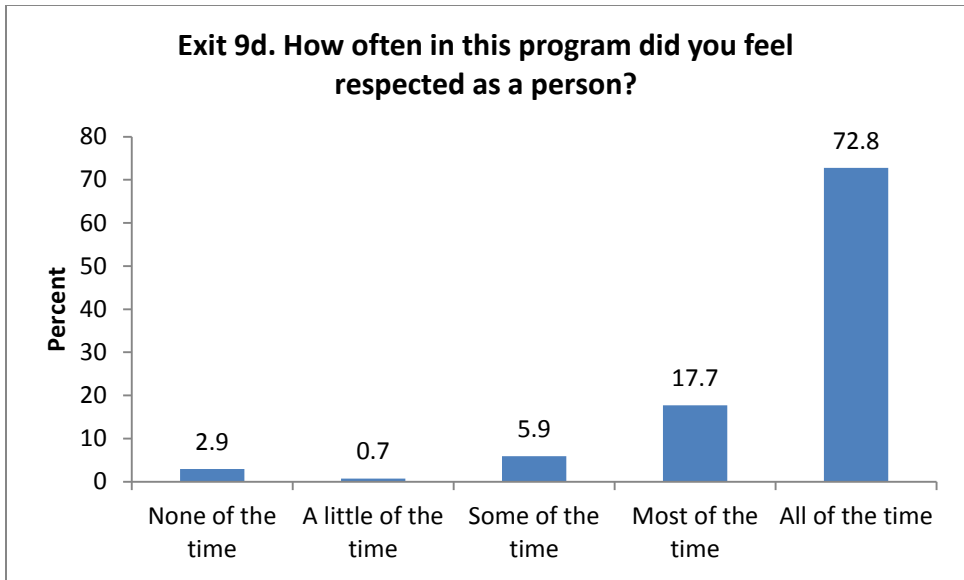
**Exit 8d. Would you say that being in the program has made you more likely, about the same, or less likely to abstain from sexual intercourse (choose not to have sex) in the next 6 months?**

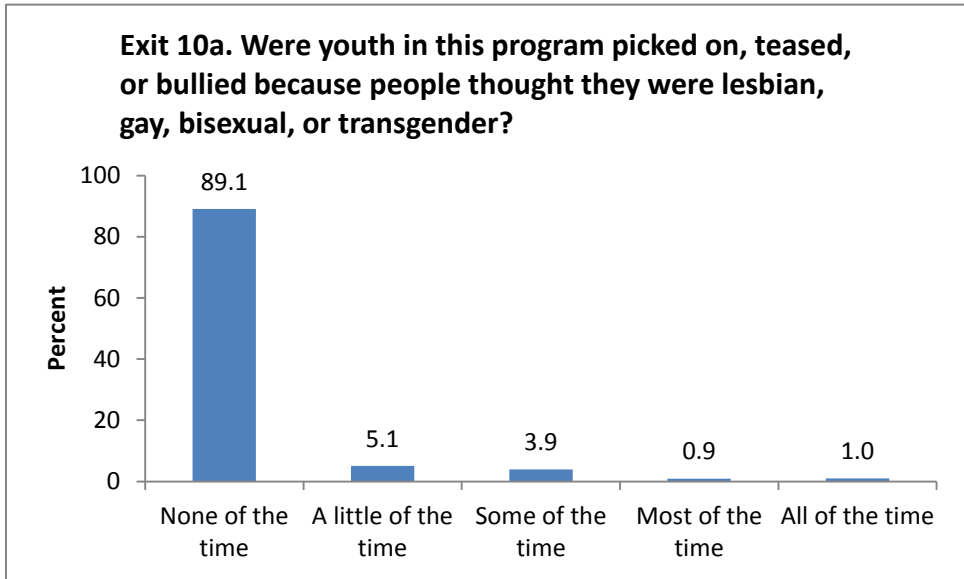
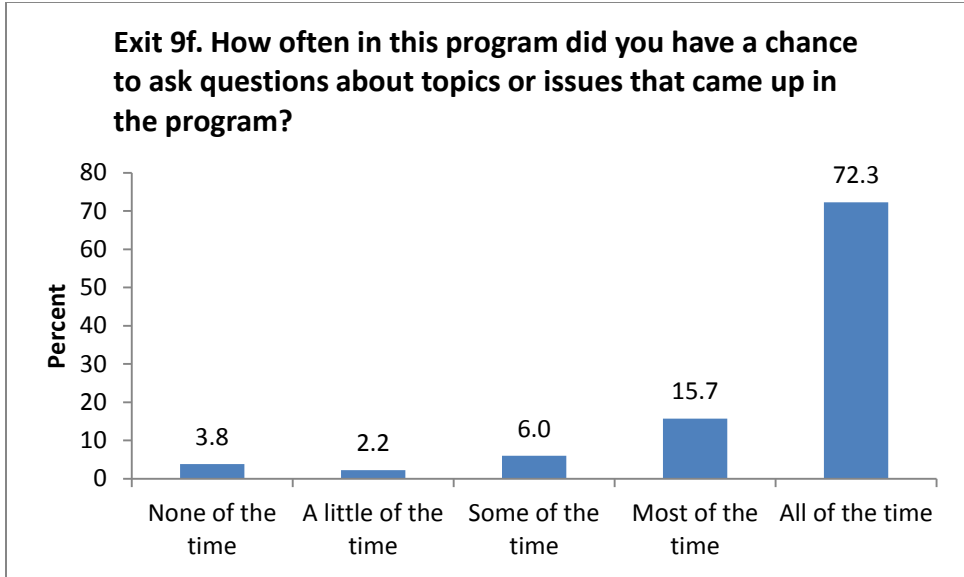


**Exit 9a. How often in this program did you feel interested in program sessions and classes?**

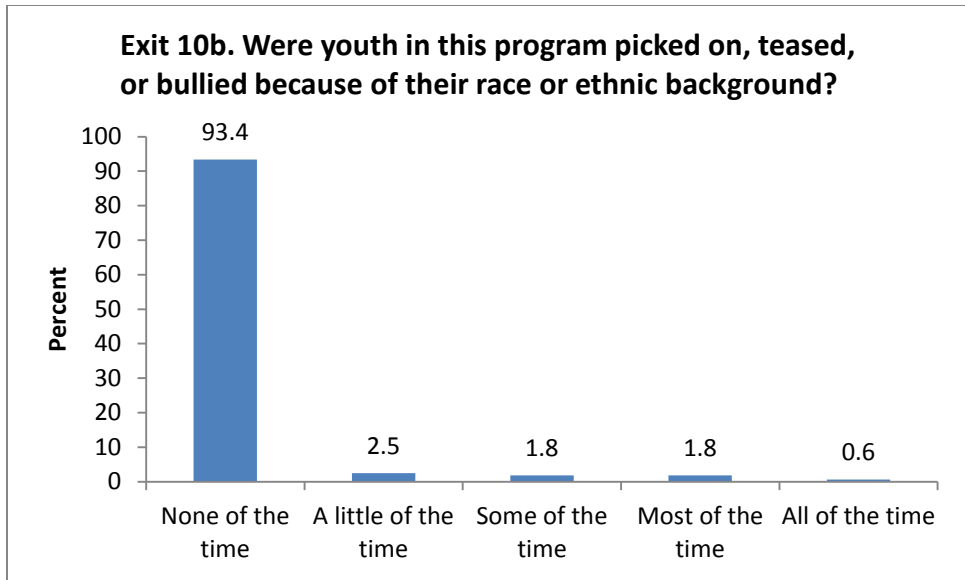












**Limitations**

Data for this report came from participant responses to an Entry Survey prior to curriculum instruction and an Exit Survey after curriculum instruction. Participant responses in the Entry Survey were not linked to their responses in the Exit Survey. The results of this report are not intended to measure the efficacy of the curriculum implemented. No control or comparison groups were used; therefore, any changes noted in the results cannot be attributed conclusively to the curriculum instruction but instead only reflect change that took place over the implementation period based on self-reporting by the program participants. Conversely, lack of changes observed does not signify failure of the curriculum to produce intended results. Results cannot be generalized to broader Oklahoma school populations or to greater student populations within schools that received curriculum instruction. Additionally, despite measures taken to ensure the participants’ confidentiality and anonymity, participants may report socially desirable behaviors or attitudes instead of actual behaviors or attitudes due to the presence of adults in the classroom or fear of having their responses known by others.