The National Campaign
to Prevent Teen and Unplanned Pregnancy

Family and Youth Services Bureau

U.S. Department of Health and Human Services
Administration for Children, Youth and Families (ACYF)
Family and Youth Services Bureau (FYSB)

*Working with Schools

Webinar
July 17, 2013
3:00 p.m.-4:30 p.m. EST

*Presenters

* Kyle Lafferty, MPH, MST, Senior Manager of State Support, The National Campaign to Prevent Teen and Unplanned Pregnancy
* Joy Robinson-Lynch, MA, LMHC, Sexual Health Education Coordinator, Massachusetts Department of Elementary and Secondary Education
* Melissa F. Peskin, PhD, Associate Director of Evaluation, The University of Texas Prevention Research Center

*Webinar Description

* Partnering with schools is a practical way to reach your youth with quality teen pregnancy prevention (TPP) programming. This Webinar includes key considerations for approaching and engaging schools in TPP work as well as strategies from those on the ground for making these partnerships successful.

Participants will be able to

* describe the benefits of partnering with schools to implement TPP programming;
* list possible challenges and solutions for working with schools to implement TPP programming; and
* cite examples of successful school partnerships to address teen pregnancy.

*Objectives

*Why Work with Schools?

*Video

*provides ready access to youth;

*facilitates retention and recruitment; and

*creates opportunities for sharing resources such as classroom space, computers, staffing, etc.

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*offers platform for reaching underserved youth

*Working with schools

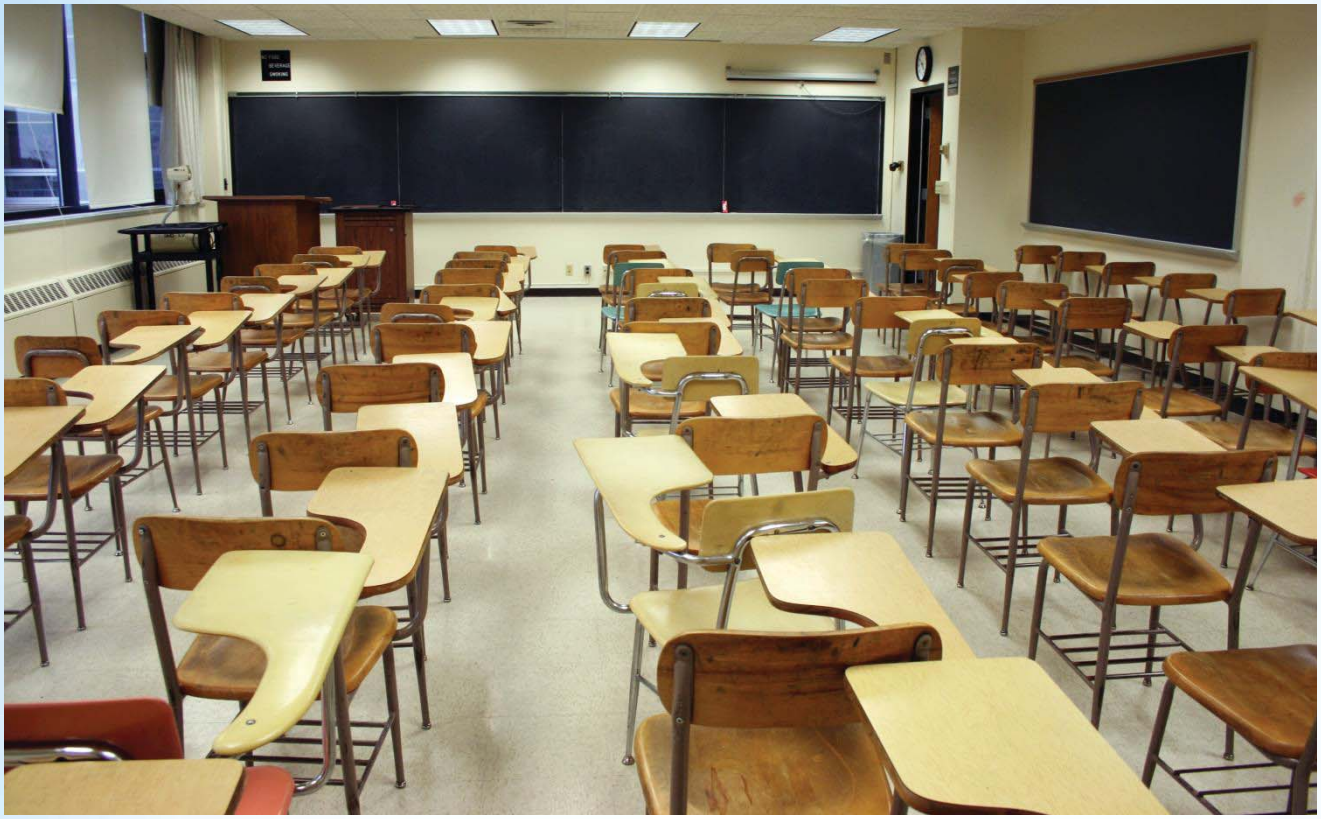
*Why Should Schools Work with Us?

*Video

- 62% of girls who have a child before age 18 do not get a high school diploma by age 22.
- 30% of teen girls who have dropped out of high school cite pregnancy or parenthood as a reason.
- Children born to mothers under 18 years of age score significantly worse on measures of school readiness, including math and reading tests.

*Compelling Data

(Perper, 2010; The National Campaign, 2012; Mollborn & Dennis, 2011)



*How to Work with Schools

Challenges to Working with Schools	Strategies for Addressing Challenges
Scheduling	**Flexibility**

*Policy Challenges

Challenges to Working with Schools	Strategies for Addressing Challenges
Administrator Buy-In	**Frame Your Program: Benefit vs. Cost**

*School Environment

Challenges to Working with Schools	Strategies for Addressing Challenges
Anxiety Over Content	**Identify Champions**

*Key Considerations for Tribal Communities

* Joy Robinson-Lynch, Massachusetts Dept. of Elementary and Secondary Education

* Melissa F. Peskin, The University of Texas Prevention Research Center

*Examples from the Field

Partners with a Purpose

Teen Pregnancy Prevention in Schools

Joy Robinson-Lynch, MA, LMHC
Sexual Health Education Coordinator

MASSACHUSETTS DEPARTMENT OF
ELEMENTARY AND SECONDARY
EDUCATION

Who Am I?

I am a Sexual Health Education Coordinator with experience working with

- health clinics,
- social service agencies,
- schools, and
- government.

PREP in Massachusetts

We collaborated with the Department of Public Health to apply for PREP funding.

Approximately 40% of the funding comes to the Department of Elementary and Secondary Education.

We identified high-risk school districts.

We offered them funding to implement PREP.

Four school districts agreed.

We will serve approximately 2,200 8th graders per year.

Town	2008 teen births/1,000	% births to teen parents	2007 Chlamydia cases/ 100,000 teens	2009 % HS dropout students	2008 % teen births to Hispanic mothers
Massachusetts	20.1	6%	1,080	9%	36%
Holyoke	115.3	23%	3,997	34%	87%
Springfield	61.4	20%	4,151	28%	66%
Lawrence	80.9	16%	2,789	30%	94%
New Bedford	62.9	14%	1,748	23%	33%
Fall River	56.2	14%	2,012	25%	8%
Lowell	48.7	12%	1,066	13%	31%
Lynn	53.2	11%	2,021	14%	57%
Worcester	36.4	10%	1,348	14%	26%
Boston	28.6	8%	3,186	19%	38%

PREP in Massachusetts

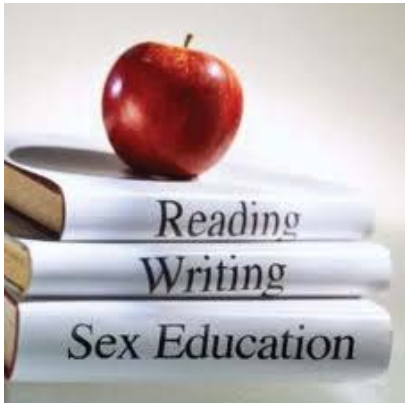
We worked with community partners who had identified support for sexual health education.

We offered schools funding to pay for release time to study local issues and science-informed responses.

We offered schools funding to pay for curricula, substitute, or release time for professional development.

We funded two districts to hire new staff.

Why Did Massachusetts Fund Schools?



- Available audience
- Highly effective
- Numbers, numbers, numbers
  - In one school, one teacher can deliver health education to as many as 500 students per semester!
  - Attendance in school programs is generally above 90%

Why Did Massachusetts Schools Implement PREP?

Uses an evaluated curriculum.

Can be used to teach the Common Core.

Parents want it.

Increases school engagement.

Decreases school dropouts.

Can reduce time out of class.

Sends a message that the school cares.

What Do Students Gain from PREP in School?

They expect to learn in school.

They feel seen.

They feel cared about by teachers.

They can attend to school instead of searching for information.

They have the tools they need to succeed.

Type into the Question Box

What have been your biggest challenges to working with schools?

Challenges to Working with Schools

We will cover the following:

- how schools operate;
- the language of education;
- the keys to collaboration; and
- roadblocks and detours.

How Schools Operate

Schools move at an incredible pace.

There is often little lead time.

Teachers often have little autonomy or control.

Collaboration is uncommon.

Base funding is guaranteed, but increases depend on the good will of voters.

There is often tight control by administrators and school boards.

Principals and administrators fear controversy.

The Language of Education

Your agency probably calls adolescents...

"clients" or "participants"

Type into the Question Box what schools call those same teens.

Students

What is meant by *year*?

You mean:

July to June; or

January to December

Schools mean:

September to June

What is meant by *schedule*?

You mean:

Flexible

Varies

Changes by need

Schools mean:

Number of periods per day or week

What is meant by *supervision*?

You mean:

Regular oversight

Clinical supervision

Improving practice

Schools mean:

Annual review/brief observation

What is meant by *youth contact*?

You mean:

3–5 hours per day

Schools mean:

Responsible all day

What is meant by *days of work per year*?

You meant:

Approximately 250 days

Schools mean:

180 days

TERM	SCHOOL	CBO
Year	September to June	July to June January to December
Adolescent	Student	Client
Planning	Lesson plans: 1 day to 1 week ahead	Annual Plan Quarterly Plan Monthly
Schedule	Number of periods teaching per day or week	Flexible Varies Changes by need
Evaluation	Grades of students AYP	Number of clients seen Rarely outcomes
Meeting times for collaboration	Before or after school Common planning periods (rare)	Flexible, often 9 a.m. to 5 p.m.
Parents	Opposition Demanding Sometimes seen as deficient	Clients "Us" Sometimes seen as deficient

TERM	SCHOOL	CBO
Funding	Town/city funds	Grants, RFP, Change work to match funding
Supervision	Annual review/ brief observation	Regular oversight/ Clinical supervision, exploring improving practice
Professional Development	PDPs often in school	CEUS outside of agency
Youth Contact	Responsible all day	Contact 3–5 hours per day
Numbers	Students per class Classes per week	Attracting clients
Goals	Learning goals	Grant goals
Days of work per year	180 days	240–250 days

Keys to Collaboration

Understand the school's needs.

Find your champion(s) in the school.

Champions can include

- nurses,
- health teachers,
- counselors,
- Gay-Straight Alliances advisors,
- teachers
- parents,
- youth, and
- school board members.

Keys to Collaboration

Have your champion connect you to decision-makers, such as

- wellness committees,
- principals,
- superintendents,
- school boards,
- health coordinators, and
- students.

Offer to assist decision-makers with their goals.

Keys to Collaboration

Be flexible.

Can you deliver the full curriculum?

Can you train teachers to deliver the curriculum?

Can you implement after school?

Can you assist with classroom activities?

Train peer leaders.

Train peer advocates.

Roadblocks and Detours

Roadblock: Fidelity

Can the school deliver the curriculum with fidelity?

- Will it fit their schedule?
- What about snow days?
- What happens when the class is not available (e.g., field trips, assemblies, standardized testing)?

Detour: Get Creative!

Planning guides

Extra time

Flexibility

All-day activity

After school

Roadblock: Fear of Parents' Response

We can't show condoms in school.

This sends the wrong message.

Aren't we sending a mixed message?

We don't want to offend parents.

Detour: Open Communication

- How will parents respond?
  - With support for the program!
- Hold a parent information meeting.
  - Hold the meeting at supper time.
  - Provide child care.
  - Offer activities for older students.
- Allow parents to opt out.

Detour: Highlight Program Benefits

How will parents respond?

Research shows that the more young people know about sex, the longer they delay sexual activity.

This is a class on self-management.

We are preparing youth for healthy adult sexual lives.

Students will gain knowledge about the seriousness of sexual activity and the skills to be in control.

Tips and Strategies for Working with Schools to Implement Teen Pregnancy Prevention Programming:
Lessons Learned with It's Your Game…Keep it Real

Melissa F. Peskin, PhD

University of Texas Prevention Research Center

UTHealth | School of Public Health
The University of Texas
Health Science Center at Houston

University of Texas Prevention Research Center (www.utprc.org)

UTPRC is located in Houston, Texas.

It is 1 of 37 CDC-funded prevention research centers in the country.

Its focus is to mobilize community partnerships for effective sexual health education in schools.

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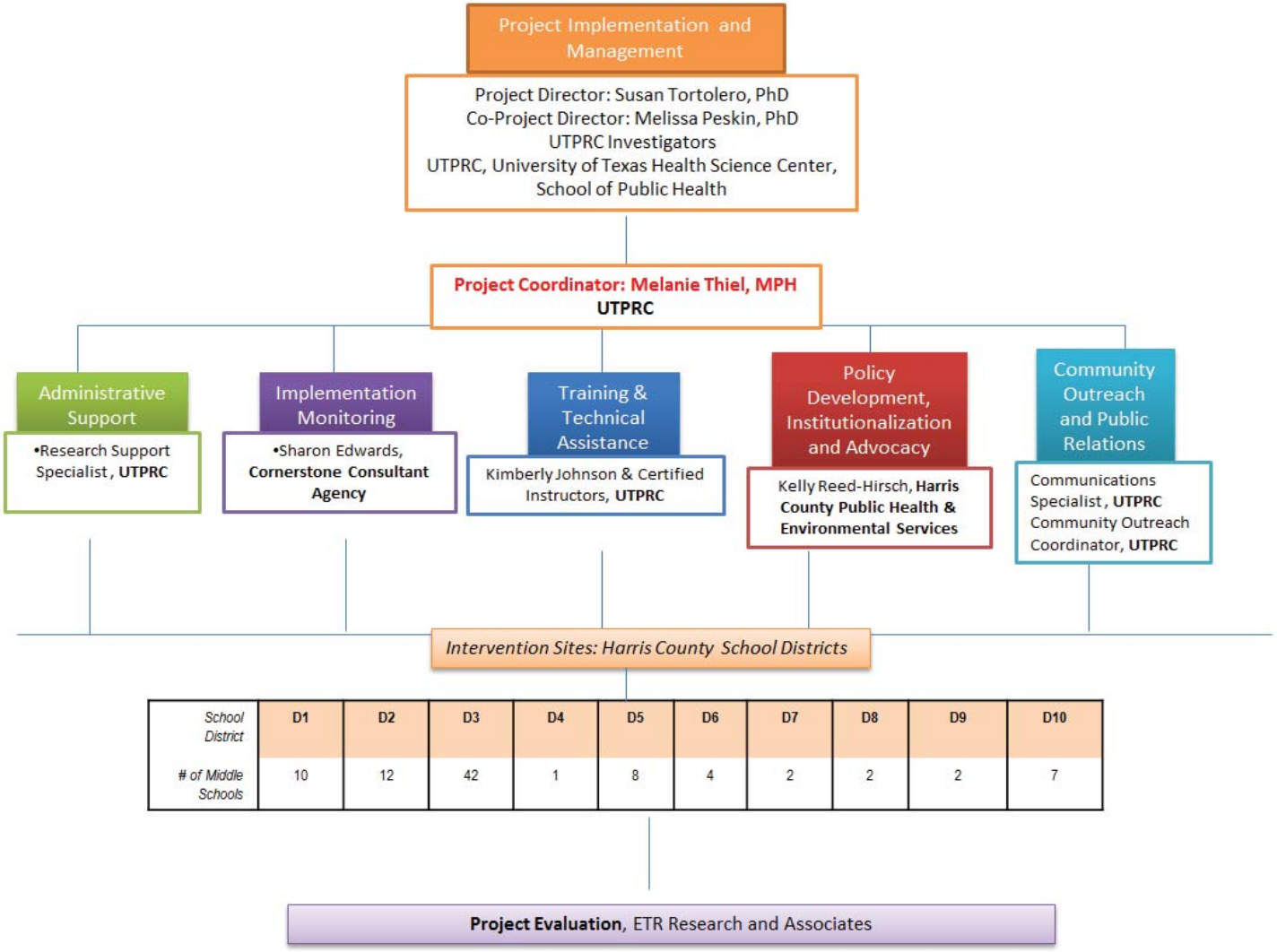
OAH Tier 1 Replication of It's Your Game…Keep it Real in Harris County and Surrounding Areas



School District	D1	D2	D3	D4	D5	D6	D7	D8	D9	D10
# of Middle Schools	10	12	42	1	8	4	2	2	2	7

It's Your Game…Keep it Real (www.itsyourgame.org)

7th and 8th grade curricula

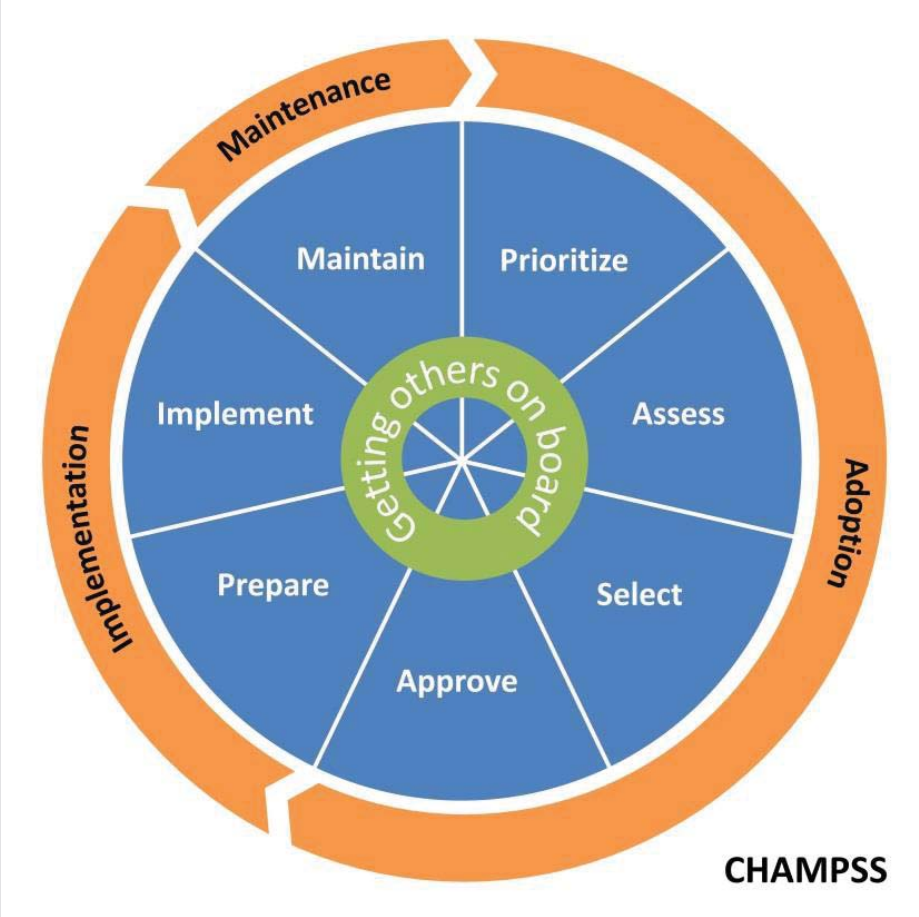
- Primary message: abstinence from sexual behavior
- Secondary message : risk reduction
- 12 lessons for each grade level

Multiple modalities

- Classroom lessons (role play, discussion)
- Journaling
- Individualized computer-based component
- Selected activities tailored by gender and sexual experience

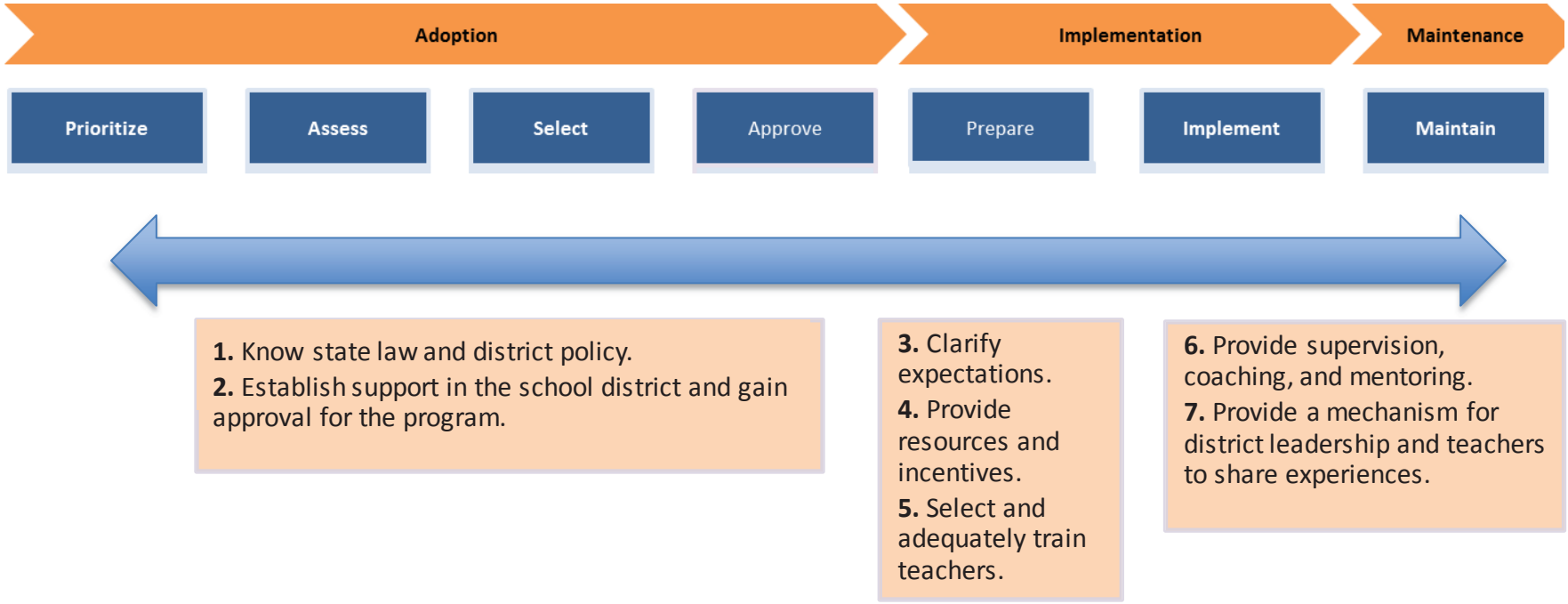
Sources: Markham et al., 2012; Tortolero et al., 2010

Replication Model: Choosing and Maintaining Programs for Sex Education in Schools



Source: Hernandez et al., 2011

Lessons Learned by Stage



Lesson #1: Know State Law and District Policy

Talk with school district officials to determine if a policy exists.

- Schools may or may not have one.
- Some may use state policy.

Work with school district officials to develop a policy if one does not exist.

Lesson #2: Establish Support in the School District and Gain Approval for the Program

Present and distribute materials to key stakeholders:

- school health advisory committee members;
- school board members;
- superintendents;
- district health/wellness coordinators;
- teachers;
- parents;
- school administrators; and
- community organizations.

Lesson #2: Establish Support in the School District and Gain Approval for the Program

Start the dialogue of prevention within the community.

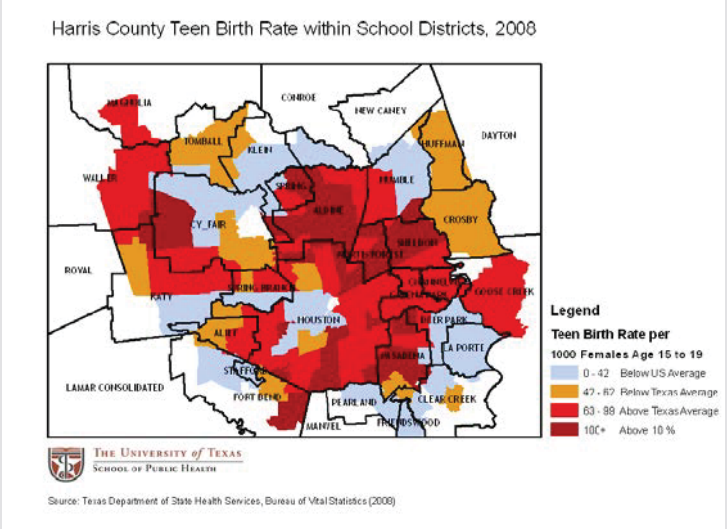
Increase awareness of the problem.

Present data in clear, simple terms.

Personalize the problem.

Provide testimonials.

Present solutions.



UTHealth | School of Public Health
The University of Texas
Health Science Center at Houston

Lesson #2: Establish Support in the School District and Gain Approval for the Program

Start the connection with messages they already believe.

"We all want to increase academic achievement."

Have prepared responses for misperceptions that most people have.

Use words that are helpful (parental involvement, fact-based curriculum, health, values) vs. problematic (evidence-based, program, skills).

Lesson #3: Clarify Expectations

Discuss up front what is required of the school district's participation:

- school board approval;
- district-level participation (district coordinator);
  - liaison between school staff and district-level staff;
- teacher participation and training;
- an implementation plan (classes, schedule, number of students);
- agreement to periodic observation; and
- participation in fidelity and implementation monitoring.

Specify expectations in a memorandum of understanding which aids in program sustainability.

Lesson #4: Provide Resources and Incentives

Tie incentives to completion of deliverables in stages:

- district approvals and establishment of district coordinator;
- development and approval of school implementation plan;
- completion of staff training and certification; and
- school performance.

Tie dollar amount to school district size.

Allow flexibility in how school districts allocate funds (e.g., computers, lesson supplies).

Lesson #5: Select and Adequately Train Teachers

- Most of the teachers were in health and physical education; some were in science and social studies
  - It was not feasible to give teachers a choice of whether to teach.
  - Most were enthusiastic, but not all.
  - The best teachers were well-prepared, followed the lesson plan, and engaged with students.
- We trained approximately 250 teachers.
- The training covered 7th and 8th grade.
- There was a booster in between 7th and 8th grade.

Lesson #5: Select and Adequately Train Teachers

The 2- to 3-day training should include

- a curriculum overview;
- lesson demonstration and modeling;
- interactive lesson practice and feedback;
- guidance on handling sensitive issues; and
- strategies for addressing implementation challenges.

Lesson #5: Select and Adequately Train Teachers

So what are teachers saying about these trainings?

"It helped me to understand that it is not just sex ed."

"They are real life activities that we can all use to feel more confident about teaching IYG. This program is fantastic! I'm excited to get started."

"I think it's great you have us think through *our* values."

"The training will enable me to provide a needed tool to my students. Personally, it has given me an additional tool to use with my own children."

"It was comfortable, supportive, and interactive."

Lesson #6: Provide Supervision, Coaching, and Mentoring

Supervision

- Over 250 observations were conducted by staff with the goal of observing every teacher twice
- Issues (e.g., major fidelity issues, technical difficulties) were flagged by observation staff, and feedback was provided to district coordinators.

Coaching and mentoring

- We responded to all requests for technical assistance (e.g., implementation issues regarding class size, space, and computer needs; not much on assistance with teaching).
- Requests came through teacher logs, phone calls, and e-mails.
- Newsletters were distributed to all schools to provide testimonials from teachers who taught It's Your Game…Keep It Real and resources for improving their teaching practices.

Lesson #7: Provide a Mechanism for District Leadership and Teachers to Share Experiences

- District coordinator meetings
  - occur four times per year;
  - are an excellent mechanism for sharing feedback among the districts and providing updates; and
  - provide helpful feedback to UTPRC staff.
- Teacher advisory group
- CHAMPSS group facilitated through Harris County Public Health Department
- Provided light refreshments

Overall Conclusions and Issues Going Forward

This is a complex process, especially with the large number of schools involved and collaboration from multiple partners.

It is important to establish support from the beginning and ensure the involvement of a strong program champion throughout.

It is important to keep school principals and district administration updated.

Think about sustainability from the beginning (e.g., training of trainers, teaching needs).

It can be done!

Acknowledgements

Many of the lessons learned come from the paper entitled "Lessons Learned in the First Year Implementation of a Large-Scale, Multi-District Replication of the It's Your Game…Keep it Real Sexual Health Curriculum" by Sharon Edwards (Cornerstone Consulting), Kimberly Johnson, Melanie Thiel, and Susan Tortolero (UTPRC)

Message Framing presentation, Susan Tortolero PhD

*Questions?

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* The Teen Pregnancy Prevention Training, Technical Assistance, and Annual Meeting Logistical Support project is led by RTI International for the Family and Youth Services Bureau, under Contract No. HHSP233200 5 1WC, Task Order 25.

* RTI partners with ETR Associates, Healthy Teen Network, The National Campaign to Prevent Teen and Unplanned Pregnancy, and Native American Management Services
on this project.