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Part I: Conduct Needs Assessment

Background
- Provisional Accelerated Learning (PAL) Center offers education and employment services to at-risk youth age 18-22 from San Bernardino County, CA.
- CDC YRBS (2009) states that >40% of sexually active high school students in San Bernardino County reported not using a condom during last sexual intercourse.
- Current literature reports that there are disparate rates of alcohol, drug use, STDs and HIV among minority adolescents.
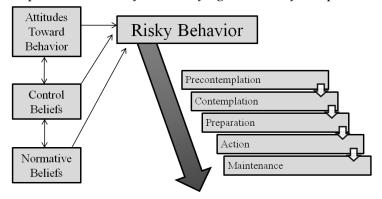
Objectives

1. Conduct a needs assessment (key informant interviews, focus groups, windshield surveys, and ethnographic observations) to determine the perceived risky behaviors of concern by students and administration at the PAL Center.
2. Plan a program that addresses perceived concerns of the students and administration as well as disparate health issues reported by San Bernardino County.
3. Implement program through 4 lessons which target awareness and knowledge of risky behaviors.
4. Evaluate program for effectiveness and sustainability.

Jacqueline Marhoff and Dhara Patel work as a team to teach about how students can protect themselves from STDs, HIV and pregnancy during the sessions at the PAL Center

Theoretical framework for Conducting Needs Assessment
- Constructs from the Theory of Planned Behavior (Azjen) were used to shape questions regarding attitude towards behaviors, normative beliefs and control beliefs. These topics were explored by asking participants about their own experiences, environment, and issues surrounding peer pressure & control.
- Transtheoretical Model was used as a supplement to help understand stages of change for certain behaviors among participants, and was key to identifying self-efficacy and perceived control.

Methods
- *Windshield Survey (n=1):* Location: PAL Center, located in Muscoy, CA (unincorporated area in San Bernardino County)
- *Key Informant Interviews (n=6):* Included students, a teacher, and a peace officer; each took place at the PAL Center.
- *Focus Group (n=1):* 13 PAL Center GED students, 85% male, ages 18-21, 76% Black, 14% Hispanic/Latino.

Results & Emergent Themes from Interviews & Focus Group
- All students reported having smoked cigarettes and/or marijuana, all reported having experience with drinking alcohol, and the majority reported engaging in or observing street violence.
- Need for social support
- Belief that recreational smoking and drinking are not harmful; they are fine if not interfering with work/school.
- Lack of perceived risks and consequences from alcohol and marijuana use
- Perceived adequate knowledge and skills for responsible decisions about sex, but also an interest in learning more about HIV/AIDS and STDS
- Attitudes of acceptance and helplessness towards violence
- High self-efficacy in all areas of behavior change

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Part II: Plan, Implement & Evaluate Intervention Program
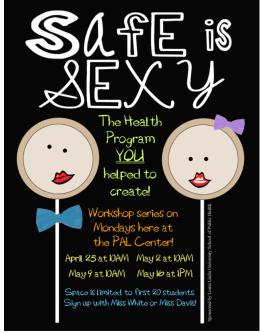
Mission Statement

Our mission is to provide at-risk youth resources, knowledge, and skills to make healthier choices about sex and other behaviors that may contribute to risky sexual behaviors, including use of alcohol and marijuana. We wish to build on existing self-efficacy of adolescents to improve decision-making in high-risk situations, such as environments with social pressure from family or friends, or in the presence of substances including alcohol & marijuana.

Intervention Program Objectives

- Provide sexual health education
- Address additional risky behaviors (alcohol, cigarette, drug use) in a discreet way—while they may not be perceived risky by participants, they are of priority in current literature, and to PAL Center administrators and program planners.
- Incorporate responsible decision making, critical thinking and problem solving activities
- Provide information about community resources (free/ affordable clinics, stop smoking help, abuse hotlines, etc.)

Engaging promotional materials were developed to recruit & retain participants for program

Program Implementation

"**Safe Is Sexy**" was implemented on Mondays April 25 through May 16, 2011 at the PAL Center.

Four sessions:

- *What Do You Know About Sex:* Fact-or-fiction game
- *Invisible Little Monsters*: A lesson on Sexually Transmitted Diseases and influence of drugs & alcohol on decision-making
- *How to Slay a Dragon:* Strategies for sexual health
- *Wrap It Up!:* Review of program and participant present what they learned (with a song, skit or poster)

Program Participants

Participants varied by session. Four students attended all 4 sessions; other students attended 1-3 sessions each. Average per session was 60% male; age range was 18 - 22 years

Young adults in the program participate in a blindfolded balloon activity aimed at helping them relate the idea of being impaired by alcohol or drugs to an increased risk of contracting STDs

Program Evaluation

- Process as well as impact evaluations were conducted through the administration of a pre- & post-test to all participants.
- Overall, the results showed that participants' increased knowledge and improved awareness about spread of STDs, HIV, birth control/contraceptives and free/affordable community resources available to young adults.
- Feedback from participants indicated that the program was interesting, understanding, useful, and &; the instructors were said to be "really helpful"; participants described program materials as "presented in an easy to understand fashion."

Lessons Learned

- Make health education relevant and important to specific target populations.
- Always be flexible and be prepared for the unexpected when working in the community, especially with youth.
- It is important to integrate the priority health issues based on perceptions of the community as well as the current data and literature.

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