Problem. Disproportionately high rates of sexually transmitted infection and unplanned pregnancy among adolescents suggest the continuing need for evidence-based sexuality education. Community-based organizations (CBOs) and their youth development professionals (YDP) have significant potential to promote adolescent sexual health; however, recent research indicates CBOs and YDP, despite willingness, are unprepared to do so, with lack of education and support resources being a particular barrier. Our goal is to develop theory-based learning and performance support tools to increase awareness, understanding, and skills among youth development workers regarding the roles they are able to play in the sexual health of the young people with whom they work.

Methods. We used iterative, user-centered development processes grounded in behavioral change theory, coupled with extensive input from CBO-based YDP and nationally respected sexual health experts, to develop support resources for YDP and embed them within a CBO-targeted sexual health portal. Evaluation activities include subject-matter-expert review, mixed-methods single-subject usability sessions, and a pilot multi-site field trial.

Results. This initial effort developed media rich web-based and traditional learning and support tools to increase CBO-based YDP awareness of their omnipresent role as sexual health role models, mindfulness of ways everyday behaviors reinforce positive and negative sexual health mores, and the diverse roles they can take to improve sexual health within their community-based organizations. Resources include case studies, modeling, video, animation, and interactive self-assessment.

Case studies. One of the best ways people learn is through watching other people, especially more advanced peers, engage in activities similar to what we would like the learners to do. The efficacy of this approach is well-established and is traceable at least as far back as Bandura. And, its not just learning...yes, people can understand a behavior by seeing it in action and, yes, they can often then mimic the behavior, but it is also true that people are more likely to actually do the behavior if they see it performed by others. Its not just about learning, its about being more willing to do. As a result, we chose to create a series of case studies around sexual health related topics. These video cases are ground in a method very similar to simulated patients, as used in medical education. We identified three diverse high performing youth development professionals to serve as our real-world practitioners. We then generated possible scenarios, iteratively refined them among experts and end-users, and then trained actors to role play the scenarios. The actors were privy to an entire case history, whereas the YDP only knew a shorter version that established their own personal history with the adolescent portrayed in the case. We set up the cameras in actual community based organizations, and we roll film and roll the scenario. What we capture is as real as one can get, warts and all, without trying to film actual people with problems—and handling all the concomitant permission and human subjects issues! Each case ran 45-60 minutes when filmed, and these were cut down to under 10 minutes each. In the end, we had 5 usable cases for Sex in the CBO. One case was determined to be too idiosyncratic to a sexual health related CBO liked Planned Parenthood since it focused on helping a young girl understand her protection options.

Asia. Worried about Pregnancy.
Asia, a 16 year old who has been attending your organization for some time, comes to your office and asks if she could talk to you. She seems very distressed and explains that she had unprotected sex with her relatively new boyfriend and now she believes she is pregnant. What would you do?

Felix. Possible self-harm and sexual identity.
Felix Menendez is a 15 year old in your after school-program. You noticed unusual bruising around Felix’s neck when he was playing volleyball with other kids at your organization today. You have known Felix for some time, though you do not have a strong personal bond with him yet. What would you do?
Tonya. Sexting.
A ping makes you aware of a student’s cell phone. There’s a no cell phone ground rule during program time so you walk over to take it. When you look at the screen, the txt says “Yo T! Send xxx px!” You know Tonya, she’s a 16 year old in your program. What would you do?

William. Wants to take relationship to ‘next level’
As you are cleaning up some space in your organization, you find a letter left behind by a William, a 15 year old male student, asking his girlfriend to help him lose his virginity. What would you do?

James. Colleague uses possibly harmful language.
You observe a fellow coach at your organization telling a 13 year old male, who is effeminate and dramatic, that he needs to “man up” so people don’t think he is too girly or gay. What would you do?

Courses/KwikZips. In addition to cases studies with expert and participant reflections, we also created three 8-10 minute animated learning modules. These modules, called KwikZips: The Late Night Edition. Sexuality Education...Fast! Introduce sexual health topics in short, fun, engaging, segments.

Sex in the CBO. What Will You Do?
This episode is all about sex. Sexual health that is, and a holistic view of sexual health as a matter of fact. What’s that mean? How is it relevant to a community based organization? Watch and find out!

You’re Already Doing It... So Why Not Do It Better!
This episode is all about you and the ways you are already doing sex in your CBO. Yes, you! What does that mean? Surely not. Surely, yes, and don’t call me Shirley! Galena has the 411. Watch and learn how you are always already doing sexual health in your organization.

What Roles Will You Play?
You know sexual health, you know you are already doing it, so what’s the big picture in your organization, how can you improve sexual health in your CBO? Galena’s got the top 7 roles. Which one’s do you know about, which will you do? Check them out...

Other Stuff We Made. An interactive self-assessment. Do you understand the big picture of sexual health, do you think of sexual relationships from a big picture perspective, from womb to tomb, relationships to intercourse? Are you willing, able, and ready to improve sexual health in your organization? This self-assessment helps you determine just where you stand. You Better Know This! A quick fact based quiz show you can share with your community. Single or multiplayer, do you know your sexual health facts and myths!? A Day at The Clinic: Denver Edition. Check out a clinic visit. What’s it like to go to a public health clinic for help? Worried about it? Don’t be. Friendly, confidential, public health folks are there to help. You can even rate how friendly the case study clinic is for adolescents. And lots of FAQs, info sheets, and other resources.

The effort was well-received by participants, led to positive changes in awareness, knowledge, and attitudes and self-efficacy, and provided formative data for future efforts. The effort remains in development, is freely accessible with login at mightyresource.org, and is currently undergoing a formative field trial evaluation.

Conclusion. CBO-based YDP are always already acting as models of sexual health and are also well-situated resources for more overt educational efforts. The current project has demonstrated these roles can be supported. Project resources will be shared and implications for future training and support efforts discussed. Supported in part by grant #070522 from the National Institute for Child Health and Human Development, a part of the National Institutes of Health.

For more information, visit mightyresource.org
Come check it out for yourself.
We are happy to share, and would love to hear from you!