

PREGNANCY PREVENTION INTERVENTION IMPLEMENTATION REPORT

Program Name:

Be Proud! Be Responsible!

Developers:

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Program Description and Overview

Be Proud! Be Responsible! is geared toward behavior modification and building knowledge, understanding, and a sense of responsibility regarding STD/HIV risk in vulnerable youth. The intervention is designed to affect knowledge, beliefs, and intentions related to condom use and sexual behaviors such as initiation and frequency of intercourse.

This curriculum is a six session curriculum delivered over the period of six one hour sessions which can be implemented in a variety of settings such as schools, community organizations and clinics.

- Module 1: Introduction to HIV and AIDS
- Module 2: Building Knowledge about HIV and AIDS
- Module 3: Understanding Vulnerability to HIV Infection
- Module 4: Attitudes and Beliefs about HIV, AIDS, and Safer Sex
- Module 5: Building Condom Use Skills
- Module 6: Building Negotiation and Refusal Skills

The program is delivered through group discussions and exercises, videos, games, and role-play.

Core Components

Content Components

- Teach correct information about HIV, STDs and pregnancy and prevention strategies including:
 - HIV, etiology, transmission, and prevention
 - STDs, etiology, types, transmission and prevention
 - Pregnancy and prevention
 - Prevention strategies – negotiation, condom use, problem solving
- Address behavioral attitudes/outcome expectancies:
 - Prevention belief: the belief that abstinence can eliminate the risk of HIV, STDs and pregnancy
 - Goals and dreams beliefs: the belief that unprotected sex can interfere with one's goals and dreams for education and a career
 - Partner reaction belief: the belief that one's partner would not approve of using condoms and react negatively to it
 - Hedonistic belief: the belief that condoms interfere with sexual pleasure, not natural, ruins the mood, doesn't fit, etc.
 - Personal vulnerability to HIV, STD and pregnancy belief: the personal belief that HIV, STD and pregnancy could happen to them if they have sex
- Build negotiation skills and problem-solving skills:
 - Teach negotiation, refusal, and reframing skills using the 4-step SWAT Negotiation Strategy to respond to partner's negative reaction towards abstinence or condom use

- Use role-play activities to practice negotiation, refusal and reframing skills
- Build participants' skills in problem solving and getting out of risky situations
- Demonstrate condom use skills and have the participants practice the skills using anatomically correct penis models (or similar type model)
- Build self-efficacy in adolescents and a desire to practice abstinences:
 - Incorporate the theme "Be Proud! Be Responsible!" throughout the intervention
- Build participants' confidence in their skills by incorporating positive reinforcement, support and constructive feedback in all intervention activities, especially in the role-plays and in practicing condom use

Pedagogy Components

- To demonstrate a caring and supportive attitude, the facilitator:
 - Must create a supportive and caring environment
 - Should demonstrate a feeling throughout the intervention of, "I truly care about you and your success, I believe in you and you can do this", using, active listening, eye contact, supportive feedback, being non-judgmental, etc.

Implementation Components

- Integrate and use the core intervention materials only:
 - The intervention curriculum manual, posters and activity materials
 - The video clips specifically selected for intervention
- Type of facilitator must:
 - Be specifically trained adult
 - Use highly participatory and interactive skills
 - Be able to work with youth, relate to them and their life circumstances and believe in youth and in their resilience
- Implementation delivery style:
 - Delivery of intervention must be highly participatory and very interactive
- Age of participants – 13-18 years of age
- Group size - ideally 6-12 youth per group
- Facilitator cannot add any other educational materials, social gatherings, community events, etc. to this program during the span of the intervention and evaluation

Target Population

Target population evaluated

- African American male adolescents, ages 11-14

Potential additional target populations noted by developers

- Diverse youth populations ages 13-18

Program Setting

Program setting evaluated

- Local school outside of the regular school day

Potential additional program settings noted by developers

- In-school classrooms
- After school groups
- Community-based organizations
- Clinics

Program Duration

- Six sessions, 60 minutes each over the course of six days
- Two three-hour sessions over two days
- One day for five hours

Curriculum Materials

Curriculum materials are available from Select Media at <http://www.selectmedia.org/>.

Adaptations

Basic allowable adaptations

Key characteristics of this program can be altered without changing the effectiveness of the program. Adaptations should be considered for different organizations, populations, etc. Adaptations are allowed if they do not alter the core components of the program.

When considering adaptations discuss whether the adaptation will affect:

- Number of days to deliver the modules and order in which modules are delivered – program should be completed within a 2 week time frame
- Deletion or replacement of modules or activities
- Age of participants – in classes with diverse age groups, group students into similar age ranges
- Group size – ideally 6-12 youth per group. Larger groups will require additional facilitators.
- Interactive activities

Program Focus

Be Proud! Be Responsible! focuses on HIV and STD prevention.

Research Evidence

Study Citation 1:

Jemmott III, J. B. (1992). Reductions in HIV risk-associated sexual behaviors among black male adolescents: Effects of an AIDS prevention intervention. *American Journal of Public Health*, 82(3), 372–377.

Study Setting:

A local school (outside the regular school day) in Philadelphia, PA

Study Sample:

157 African American male adolescents recruited from an outpatient medical clinic, local high school assemblies, and a local YMCA

- Mean age 14.6 years

Study Design:

Randomized controlled trial. About half the study participants were randomly selected to participate in the *Be Proud! Be Responsible!* intervention and half were randomly selected for a control group that received a career opportunities intervention. Surveys were administered immediately before the 5-hour intervention session (baseline), immediately after the intervention, and three months after the intervention.

Study Rating: The study met the review criteria for a **high** study rating.

Study Findings: Three months after the intervention:

- Adolescents participating in the intervention reported having significantly fewer female sexual partners and fewer days of vaginal intercourse and vaginal intercourse without a condom (prior 3 months), and were significantly less likely to report having had heterosexual anal sex.
- The study found no statistically significant program impacts on the number of female anal sex partners or frequency of heterosexual anal sex.

The study also examined program impacts on measures of attitudes, intentions, and knowledge. Findings for these outcomes were not considered for the review because the outcomes fell outside the scope of the review.

Study Citation 2: Jemmott, J. B., Jemmott, L. S., Fong, G. T., & McCaffree, K. (1999). Reducing HIV risk-associated sexual behavior among African American adolescents: Testing the generality of intervention effects. *American Journal of Community Psychology*, 27(2), 161–187.

Study Setting: A local school (outside the regular school day) in Trenton, NJ

Study Sample: 496 African American seventh and eighth graders

- Mean age 13.2 years
- 54% female and 46% male

Study Design: Randomized controlled trial. About half the study participants were randomly selected to participate in the *Be Proud! Be Responsible!* intervention and half were randomly selected for a control group that received a general health promotion intervention on heart disease, stroke, hypertension, and cancer. Surveys were administered immediately before the 5-hour intervention session (baseline), immediately after the intervention, and three and six months after the intervention.

Study Rating: The study met the review criteria for a **high** study rating.

Study Findings: Three months after the intervention:

- The study found no statistically significant program impacts on any measure of sexual activity (listed below).

Six months after the intervention:

- Adolescents participating in the intervention reported significantly lower frequency of unprotected sexual intercourse and anal intercourse, were significantly less likely to report having had anal intercourse, and reported significantly fewer anal intercourse partners in the previous 3 months.
- The study found no statistically significant program impacts on having sexual intercourse or on number of sexual intercourse partners in the past 3 months.

The study also examined program impacts on measures of attitudes toward condoms, self-efficacy, and condom-use intentions. Findings for these outcomes were not considered for the review because the outcomes fell outside the scope of the review.

Study Citation 3: Jemmott III, J. B., Jemmott, L. S., Fong, G. T., & Morales, K. H. (2010). Effectiveness of an HIV/STD risk-reduction intervention for adolescents when implemented by community-based organizations: A cluster-randomized controlled trial. *American Journal of Public Health*, 100(4), 720-726.

Study Setting: Eighty-six community-based organizations in New Jersey and Philadelphia, PA

Study Sample: 1,707 English-speaking youth ages 13 to 18

- 90% African American
- 56% female and 44% male

Study Design: Cluster randomized trial. Half the community-based organizations were randomly selected to implement the *Be Proud! Be Responsible!* intervention and half were randomly selected for a control group that implemented a general health promotion intervention on heart disease, stroke, hypertension, and cancer. Surveys were administered immediately before the intervention (baseline); immediately after the intervention; and three, six, and twelve months after the intervention.

Study Rating: The study met the review criteria for a **high** study rating.

Study Findings:

Averaged across the three-, six-, and twelve-month follow-up surveys:

- Adolescents participating in the intervention who were sexually experienced at baseline reported more consistent and frequent condom use in the previous three months.
- The study found no statistically significant program impacts on frequency of sexual intercourse in the past three months or condom use at last intercourse.

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