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2015 Personal Responsibility Education Performance Measures Report

Sexual Education Programs in School-Based Settings

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Implementation of Personal Responsibility Education Program (PREP) sexual education programs in Connecticut's Technical High Schools, Capitol Regional Education Council (CREC) high schools, and the Unified School District #2 (USD #2) schools is described. Summaries of teachers' and students' perceptions of program implementation and impact are reported. Recommendations for practice are outlined.

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2015 Personal Responsibility Education Program (PREP) Performance Measures Report: Sexual Education Programs in School-Based Settings

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Executive Summary

As part of the State Personal Responsibility Education Program (PREP) grant, Connecticut implemented two evidence-based sexuality education curricula during the 2014/2015 school year: *Be Proud! Be Responsible!* and *Reducing the Risk*. These curricula were delivered by health and physical education teachers as part of health classes in Connecticut's high schools. A total of 19 high schools participated. These included the following:

- 14 Connecticut Technical High Schools;
- 2 Unified School District #2 (USD #2) schools; and
- ♦ 3 Capitol Regional Education Council (CREC) high schools.

CT Technical High Schools and USD #2 schools implemented *Be Proud! Be Responsible!*, a six-session STD/HIV prevention curriculum designed to affect knowledge, beliefs, and intentions related to condom use and sexual behaviors among youth between 13 and 18 years of age. CREC high schools implemented *Reducing the Risk*, a sixteen-session comprehensive teenage pregnancy and HIV/STD prevention program designed for classroom use with 9th and 10th grade students. Both programs are effective in delaying sexual initiation, increasing the use of contraception, and decreasing unprotected intercourse.

To assess the 2014/2015 implementation of sexuality education programs in school settings, a local evaluation was conducted in order to:

- document educators' experience with teaching evidence-based curricula in schools;
- determine the number of youth served;
- document students' baseline levels of risk; and
- assess students' perceptions of program impact.

Data for the evaluation included web-based questionnaires completed by teachers at the conclusion of PREP-funded programs; informal conversations with teachers; and self-administered paper-and-pencil entry and exit questionnaires filled out by students.

PREP-funded programs were implemented in their entirety in 18 out of 19 participating schools. In one USD #2 school, the program was suspended after a few lessons because of scheduling issues. In 3 CT Technical High Schools, one of several program implementation cycles was not completed. That being said, in most instances programs were implemented in their entirety, without omissions or reductions in lesson content.

In teaching sexual education, teachers generally adhered to the curriculum-specified lesson sequence. In one instance, circumstances beyond a teacher's control lead to a small change in sequencing. Also noteworthy is that some teachers felt that changes in sequencing should be

made in order to better serve their students, but did not implement these changes without first addressing their concerns with the Department of Public Health.

On surveys completed upon the conclusion of PREP-funded programs, a large majority of teachers reported that they had been adequately prepared to teach sexuality education prior to actually doing so. What's more, most teachers felt confident in their ability to implement the program with fidelity and to create a positive and engaging learning environment. Regarding their experience with program delivery, teachers expressed appreciation for the interactive nature of the curricula and the wide range of activities. The challenges they identified included not having enough time to complete the lessons *and* answer all the questions posed by students; the appropriateness of *Be Proud! Be Responsible!* for the older USD #2 boys; the perception of *Reducing the Risk* role-play scenarios as unrealistic; the confusing numbering of pages in *Reducing the Risk* student and teacher books; and repetitiveness and sequencing issues in *Be Proud! Be Responsible!*

Based on the entry and exit questionnaires completed by students, it is estimated that 1,243 students attended at least one PREP lesson in a school setting. This number includes 1,223 students who completed usable entry questionnaires; 4 students whose entry questionnaires were removed from analyses; and 16 students who completed an exit but not an entry questionnaire. This number does not include surveys from one CREC school, which were sent to the evaluation team well after the end of the school year.

At the time of the entry survey administration, the average age of participating students was 15 years, with a range from 13 to 18. Regarding baseline levels of risk, the following pieces of information are noteworthy:

- ~31% of students reported that they intended to have sexual intercourse in the 6-month period following entry survey administration;
- ~21% of students reported that they had sexual intercourse at some point in their lives;
- ~7% of sexually experienced students reported that they had been (or had gotten someone else) pregnant at some point in their lives;
- ~73% of sexually experienced students reported that they were sexually active at the time of the entry surveys;
- ◆ ~18% of those who were sexually active at the time of the entry surveys reported that they had had sex with more than one person in the 3-month period prior to the entry surveys;
- ~48% of those who were sexually active at the time of the entry surveys reported using condoms consistently in the 3-month period preceding the surveys; and

• ~18% of those who were sexually active at the time of the entry surveys reported that they did not use condoms at all in the 3-month period preceding the surveys.

When asked on exit surveys about their experience with the program, over half of the students (58%) reported that they felt interest in program sessions all or most of the time and about a quarter (26%) reported that they were interested at least some of the time. An overwhelming majority reported that the program helped them learn (77%); that the material presented was clear (82%), and that they had a chance to ask questions (75%). Additionally, most students (≥85%) reported that the learning environment in their program did NOT include teasing and bullying. That being said, it is important to note that about 10% of students reported that they didn't feel respected as a person and about 5% reported that they were picked on, teased, or bullied in their program. Factors associated with the perception of a PREP program as an uncomfortable space included a lack of readiness to learn among one's peers; teachers' treatment of high school students as if they were middle school students; and a lack of efforts to raise consciousness around gender and sexuality.

Regarding their intentions to have sexual intercourse in the 6-month period following the program,

- ~48% of students reported that being in the program made them much or somewhat less likely to have sexual intercourse;
- ~35% of students felt that the program did not influence them either way; and
- ~15% of students reported that being in the program them actually made them more likely to have sexual intercourse.

Further, a large majority of students reported that the program had a positive impact on their intentions to use condoms:

- ~67% reported that they were much more likely to use condoms;
- ~15% reported that they were somewhat more likely to use condoms;
- ♦ ~14% reported that they were not impacted either way; and
- ~3% reported that they were somewhat or much less likely to use condoms.

On the whole, the findings from this evaluation indicate that the 2014/2015 implementation of PREP-funded sexuality education in school settings was a relatively successful endeavor. The findings also point to the areas for improvement, which are discussed in the concluding section of this report.

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Introduction

Although U.S. teen pregnancy and birth rates have been on an almost continuous decline over the past few decades, they continue to exceed the rates of other economically developed countries (Martin, Hamilton, Osterman, Curtin, Matthews, 2015). For example, in 2012 the U.S. teen birth rate was 1.5 times the United Kingdom rate and nearly 7 times the teen birth rate in Japan (United Nations, 2014). The rates of sexually transmitted infections (STIs) are also high: in 2008 adolescents and young adults acquired nearly 50% of incident STIs in U.S. (Satterwhite, Torrone, Meites, et al., 2013).

U.S. statistics on teen pregnancy, birth, and STIs underscore the need for efforts to promote young people's reproductive health and to prevent sexual risk-taking. At the federal level, one such effort has been funding for educational programs. Currently, there are several funding streams through which the federal government awards grants to states, cities, territories, and organizations to educate young people on abstinence and contraception in order to prevent pregnancy and STIs. One federal funding stream is the Personal Responsibility Education Program (PREP). The target population for PREP includes youth aged 10 to 19 years old, with an emphasis on those who are homeless; those who live in foster care, rural areas, or areas with high teen birth rates; those who come from racial or ethnic minority groups; and those who are pregnant and parenting.

In Connecticut, the State PREP grant was awarded to the Department of Public Health (DPH) in 2010, with funding through 2018. The grant is being administered by the DPH in partnership with the Department of Children and Families (DCF), the Department of Mental Health and Addiction Services (DMHAS), and Planned Parenthood of Southern New England (PPSNE). Programming funded by the State PREP grant includes training for adults who work with youth—that is, health and physical education teachers, social workers, foster parents, and child welfare congregate care staff—and training for young people. Since the receipt of State PREP grant funding, Connecticut has implemented evidence-based and evidence-informed sexuality education programs for youth in a variety of settings, including schools, community clinics, and child welfare group homes, with a primary focus on youth in the child welfare system.

PREP-funded programs in school settings were first implemented in the second year of State PREP funding, that is, during the 2011/2012 school year. This included implementation of the *Making Proud Choices!* curriculum in three Unified School District #2 (USD #2) schools. In the fourth year of State PREP funding—that is, during the 2013/2014 school year— the *Reducing the Risk* curriculum was implemented in two Capitol Regional Education Council (CREC) schools, and *Making Proud Choices!* was implemented in two Technical High Schools. In addition to programming for students, the fourth year of funding included a program evaluation

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component. The results of this evaluation showed that both teachers and students were highly satisfied with PREP-funded sexuality education programs (Kosutic, Cuadras, Scarpace, McCarty, & Garcia, 2014). Additionally, a large proportion of students reported that they perceived this education to be effective in promoting sexual safety.

Building on the experience from the first few years of funding, Connecticut expanded fifth year programming to include two additional CREC magnet schools, two USD #2 schools, and twelve additional Technical High Schools. The current report presents the results of an evaluation of this expansion. What follows is a brief overview of the project, an outline of evaluation methods, and a summary of teachers' perceptions of program implementation and students' perceptions of program impact. The report ends with conclusions and recommendations for future provision of sexuality education in Connecticut's schools.

State PREP Project Overview

During the 2014/2015 school year, two evidence-based sexuality education curricula — Be Proud! Be Responsible! and Reducing the Risk—were implemented in CREC, USD #2, and CT Technical High Schools in communities throughout Connecticut. CREC schools serve 36 towns in the Greater Hartford area and provide assistance to more than 150,000 students each year. Approximately one-half of the students enrolled at each CREC school reside in the City of Hartford; the others reside in surrounding communities. Of the 9 CREC secondary schools, 3 participated in the State PREP project: Metropolitan Learning Center (MLC), Two Rivers Magnet High School, and Academy of Aerospace and Engineering. MLC employs a globalsystems curriculum, which "emphasizes cross-cultural awareness, knowledge of the global dynamic, state of the planet awareness, and understanding of the consequences of human choice" (CREC, 2015). Two Rivers Magnet High School and Academy of Aerospace and Engineering (AAE) both focus on science, technology, engineering, and math. Two Rivers supports the environmental science theme, whereas AAE centers on aerospace, engineering, and biomedical sciences. All three schools seek to improve the quality of public education by providing quality services. In 2014 AAE was ranked number one in Connecticut and MLC was ranked in the top 30 high schools in Connecticut (De La Torre, 2014).

Technical High Schools in Connecticut are part of the CT Technical High School System (CTHSS), "a statewide system of 16 degree-granting technical high schools and one technical education center, serving approximately 10,800 full-time high school students with comprehensive education and training in 36 occupational areas. High school students receive a college preparatory curriculum and earn a Connecticut high school diploma as well as a certificate in a specific trade technology. Approximately 45 percent of graduates go on to college and approximately 50 percent go on to employment, apprenticeships or the military following graduation" (State of Connecticut, 2015). Fourteen of the sixteen Technical High Schools

participated in the State PREP project. The remaining two schools had a turnover in staff and lacked a trained *Be Proud! Be Responsible!* facilitator; for that reason, they could not participate in the State PREP project during the 2014/2015 school year.

USD #2 schools are part of a district that operates within the Department of Children and Families (DCF) and "provides educational services to students who reside in DCF facilities and whose treatment needs require they receive their education within the facility. It also provides educational services to students who have a status of no-nexus and who have been placed by DCF in a private residential facility, a psychiatric hospital with an approved special education program or in the residential component of a Regional Education Services Center" (DCF, 2014). Two USD #2 schools participated in the State PREP project: the Albert J. Solnit Children's Center—North Campus and the Walter G. Cady School. Solnit North provides treatment to adolescent boys with complex psychiatric needs. "The facility provides an educational program, work experience opportunities and rehabilitation including therapeutic recreation and occupational and music therapies" (DCF, 2014). Cady is a school within Connecticut Juvenile Training School (CJTS), a secure facility for boys adjudicated as delinquent and committed to DCF.

As part of the State PREP project, CREC teachers implemented *Reducing the Risk*, an evidence-based sexuality education curriculum, in 9th grade health education classes. *Reducing the Risk* was developed for high school students, primarily 9th graders, in order to promote an awareness of consequences associated with STDs/HIV and with teenage pregnancy; promote the value of safer sex and abstinence; increase knowledge of STDs/HIV and pregnancy prevention; and increase refusal and negotiation skills (ETR Associates, 2013). The curriculum consists of sixteen classes that are designed for 45-50 minute class periods. In a quasi-experimental evaluation with a sample of 758 predominantly White and Latino students, *Reducing the Risk* was found to be effective in delaying sexual initiation and, among lower-risk youth, increasing the use of contraception and decreasing unprotected intercourse (Kirby, Barth, Leland, & Fetro, 1991).

Teachers in Technical High Schools and USD#2 schools implemented the *Be Proud! Be Responsible!* evidence-based comprehensive HIV/STD prevention curriculum, which was originally developed for Black, urban boys between 13 and 18 years of age and subsequently implemented in diverse populations. In a randomized controlled trial conducted with 157 youth, *Be Proud! Be Responsible!* was found to reduce frequency of sex, reduce the number of sexual partners, and increase condom use (Jemmott, Jemmott, & Fong, 1992).

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¹ <u>Per ETR Associates</u>, RTR "classes can be expanded to fill more time, or 2 full periods, by increasing time to practice the skills and discuss the activities."

Evaluation Methods

Design

The 2014/2015 Connecticut State PREP evaluation employed a before-and-after design in order to document the number of participants and their demographic background characteristics, explore students' and teachers' experiences with PREP-funded programming, and assess participants' perceptions of program impact. Data sources included student questionnaires, completed before and after participation in sexuality education programming; teacher questionnaires, completed after program conclusion; and informal conversations with teachers.

Questionnaires

Student Questionnaires. Entry and exit questionnaires developed by Mathematica Policy Research, a federal contractor for the national PREP evaluation, were used for the 2014/2015 Connecticut evaluation. Entry questionnaires included single item measures of demographic background characteristics, sexual activity, and self-perceived adulthood preparation. Exit questionnaires inquired about participants' perceptions of program effectiveness in promoting abstinence, delaying sexual activity, promoting the use of contraception, improving wellbeing, and preparing students for adulthood. In addition to closed-ended questions, Connecticut exit questionnaires included an open-ended question about participants' experiences with the program.

Teacher Questionnaire. Teacher questionnaires were developed by the Connecticut PREP team based on the *Reducing the Risk* implementation fidelity survey. They included closed- and openended questions about implementation audience and setting, implementation schedule, and teaching experience.

Data Collection Procedures

Data Collection from Students. Students completed self-administered paper-and-pencil entry and exit questionnaires during health class in the presence of their health/physical education teacher. Questionnaires were formatted as "fill in the bubble" computer-scannable forms, which allowed for computerized data capture. Entry questionnaires were administered before the implementation of sex education curricula, in the period between September 2014 and March 2015. Exit questionnaires were administered upon the completion of sexuality education curricula, in the period between November 2014 and June 2015.

At the beginning of the school year, teachers were provided with verbal and written instructions on overseeing the administration of the PREP questionnaires. This included scripts for explaining the purpose of the project, discussing confidentiality, and addressing possible discomfort with some questions. Teachers were asked to take measures to protect students' privacy (e.g., spreading out desks throughout the classroom), to encourage students to read and

follow questionnaire instructions, and to prompt students to place completed questionnaires in opaque envelopes and to seal the envelopes before handing them in.

Data Collection from Teachers. Teacher questionnaires were administered via the internet. Participating teachers were e-mailed a hyperlink and asked to fill out a web based survey upon completing all PREP-funded lessons. Because program end-dates varied across participating schools, periodic e-mail reminders were sent to teachers over the course of the school year.

Data Processing and Analysis

Processing and Analysis of Student Questionnaires. Packets with completed questionnaires were sent to the evaluation team for processing and data analysis. One member of the evaluation team used the optical mark recognition (OMR) software to convert scanned questionnaires into an electronic database. Another member of the team conducted random checks of paper forms against the electronic database to examine the accuracy of data capture and to correct any errors. In addition to conducting random checks, the evaluation team compared all forms completed using checkmarks or crosses (rather than bubbles). Forms filled out with a light-colored writing utensil (rather than a black or blue pen) were also checked against the electronic database.

Prior to conducting analyses, evaluators examined each question in the dataset to identify outof-range responses and inconsistencies (e.g., gross mismatch between age and grade in school, sexual inexperience and the use of contraception, etc.). Inconsistent responses were set to missing. Missing data (nonresponse) were not imputed. Four questionnaires exhibited unequivocal signs of "monkeying" and were thus removed from the dataset prior to analyses.

The analysis of closed-ended responses included computations of proportions and measures of central tendency and variability in a sample of 1,223 entry questionnaires and 1,097 unmatched exit questionnaires.

Of 1,097 students who completed exit questionnaires, 879 (~80%) provided a written comment about their experience with the PREP-funded sexuality education program. Two members of the evaluation team coded the valence of students' comments as positive, negative, mixed, or neutral. The level of agreement between the two sets of codings was 97%. Discrepancies were resolved through consensus.

In addition to coding the comments for valence, one member of the team conducted an inductive thematic analysis in a subsample of students from 9 schools.² The thematic analysis

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² The subsample on which the thematic analysis was conducted included 514 students from two CREC schools (MLC and Two Rivers), one USD #2 school (Cady), and six technical high schools (Grasso, Goodwin, Abbott, Bullard-

involved grouping together comments or portions of comments that dealt with the same issue. Categories formed in this way were not mutually exclusive, which is to say that the same comment could and sometimes did fit into multiple categories. Data were then reviewed several times to ensure that each comment was appropriately coded and that the emergent coding scheme fit the data well. In this process, coding categories were modified several times—merged together in some instances, split into smaller categories in others. In the final step categories were grouped into 4 overarching themes.

Analysis of Teacher Questionnaires. Analyses of teacher questionnaires included computation of descriptive statistics, that is, measures of central tendency and variability, and a thematic analysis of open-ended responses by one member of the evaluation team.

Havens, Cheney, and Platt). A total of 100 students did not answer the question about their experiences in a PREP program. Thus, comments from 414 students were available for analysis.

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Teachers' Perceptions of Program Implementation

Fifteen teachers completed web-based surveys upon the completion of all lessons. A large majority (14/15) of participating teachers reported that they were certified to teach physical education and health. One reported that he or she was certified to teach biology and general science in addition to health. Another teacher reported that he or she was also a school counselor. Of fifteen teachers, three worked in CREC schools, two in USD #2 schools, and ten in Technical High Schools. In terms of demographic background characteristics, a majority of participating teachers (11/15) were women between 25 and 44 years of age.

CREC teachers reported that sexuality education classes were taught 2-3 times per week, with 45-minute periods in AAE and 60-minute periods in MLC. Lessons were taught in a sequence specified in the curriculum in all four implementation cycles. Both AAE and MLC parents/guardians were notified that their children would be receiving sexuality education. No MLC parents opted out of the PREP program, whereas 3-5 AAE parents did.

Sexuality education classes were held 3 times per week in Solnit North and 5 times a day for 8 days in Cady—the two USD#2 schools. In Solnit North lessons were suspended mid-way through the curriculum because of scheduling issues. In Cady, lessons were for the most part held in sequence. Classes were cancelled one afternoon and the unit scheduled for that day was made up one week later. Parents/guardians were given an opt-out option in Solnit North but not in Cady. In Solnit North, one family elected not to have their child participate in the program.

In Technical High Schools (THS) sexuality education classes were most commonly held 2-3 times per week during the academic cycles, which alternated periodically with shop cycles. Periods were about 45-50 minutes in length (depending on the school). All ten THS teachers reported that they taught lessons in the specified sequence. Parents/guardians were notified about sexuality education in five schools; they were not notified in three schools; one teacher didn't know whether parents were notified; and one teacher did not answer this question. In most schools, fewer than 3 parents/guardians opted out of the program. In one Technical High School, however, more than 10 parents opted out.

Figure 1 shows teachers' responses to questions about preparation to teach sexuality education using an evidence-based curriculum. All participating teachers reported that they had been trained on implementing the curriculum before actually doing so. What's more, all teachers reported that the training they had received was adequate. All but one teacher reported that they reviewed the activities in the curriculum prior to program implementation and that they had prior experience with sexuality education and other skills-based curricula. Most (11/14)

reported that they taught or practiced teaching most of the activities prior to implementing the curriculum; three, however, reported that they did not do so.

Figure 1. Teachers' reports on their preparation to teach a sexuality education curriculum $(n = 14)^3$

Before you taught the PREP sexual education curriculum this school year, had you...

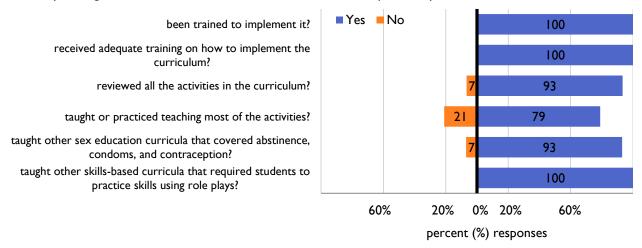
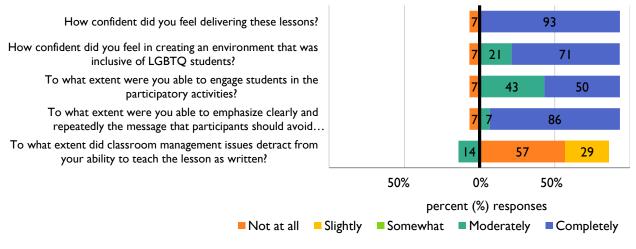


Figure 2 shows teachers' responses to questions about their confidence to create a positive environment for learning about sexual health. All but one teacher reported that they were confident in delivering the lessons, creating an environment that was inclusive of LGBTQ students, engaging students in participatory activities, and emphasizing the importance of avoiding unprotected intercourse. Classroom management issues were a moderate issue for two teachers, but not much of an issue for others (12/14).

Figure 2. Teachers' reports on their confidence to create a positive learning environment (n = 14)



³ Two teachers provided two sets of responses during the 2014/2015 school year. For each of these, the second response was removed from the frequencies reported in Figures 1 and 2. One additional teacher did not answer the questions about preparation to teach a sexual education curriculum.

Another aspect of preparation to teach sexual education is one's comfort with the topic. A majority of teachers (9/14) reported that they were "very comfortable" with discussing sexual education topics with students. However, interestingly, over one third of teachers (5/14) reported that they were "very uncomfortable" with such discussions.

In addition to responses to closed-ended questions, teachers wrote comments about what they did and didn't like about PREP and what suggestions they had for improvement. Teachers across schools and education curricula (i.e., *Be Proud! Be Responsible!* and *Reducing the Risk* curricula) reported that they appreciated the interactive nature of lessons, along with a wide range of activities:

Loved the interactive lessons, I like the real situations and the workbook. (CREC)

I enjoyed providing this curriculum to the students. They were able to gain valuable insight using the activities, DVDs, role plays, and condom demonstration. (THS)

In addition to the variety of activities, teachers appreciated the fact that the lessons were structured, timed, and planned out in advance. What did not work out so well was a lack of time to cover all the information and to address the multitude of questions that students raised about STIs and other aspects of sexual health. As teachers put it:

There were a LOT of questions and it was hard to assure the kids there would be time made for the questions. (CREC)

Time. Too much information and not enough time. Spent extra time on birth control methods and STD's [sic] because the students didn't have much background knowledge. (THS)

Other challenges included the appropriateness of *Be Proud! Be Responsible!* for older CJTS boys (i.e., boys being too old for the curriculum); the perception of *Reducing the Risk* role-play scenarios as unrealistic; confusing numbering of pages in *Reducing the Risk* student and teacher books; repetitiveness and sequencing issues in *Be Proud! Be Responsible!*; and the amount of time spent on lectures in *Be Proud! Be Responsible!* In addition to noting challenges, teachers provided ideas for curriculum improvement, which are presented in Table 1.

Table 1. *Teachers' suggestions for curriculum improvement*

	BE PROUD! BE RESPONSIBLE!		REDUCING THE RISK
-	 Select fewer activities and spend more time on them. Incorporate assessments into the curriculum to track learning. 		Change role-play scenarios to make them more realistic. Include students in role-play design. Reorganize page numbers in workbooks.
-	Reduce the amount of time spent on lectures.		
-	Integrate technology, such as pollster.com.		
_	Address sequencing issues.		

Participating Students

A total of 1,223 students completed usable entry questionnaires and 1,097 usable exit questionnaires. Table 2 presents a breakdown of usable entry and exit surveys by the school system, the school, and a student's grade in school. As the counts in Table 2 show, CREC schools served 9th grade students; THS schools served 9th and 10th grade students; and USD #2 schools served students in grades 7 through 12.

Table 2. Performance Measures Entry and Exit Surveys by School System, School, and Grade in School

	ENTRY SURVEYS						EXIT SURVEYS						
GRADE:	7 th	8 th	9 th	I O th	l l th	I 2 th	7 th	8 th	9 th	I O th	l I th	12 th	
CREC Secondary Schools													
Metropolitan Learning Ctr.			100						97				
Two Rivers High School			54						49				
Academy of Aerospace &			7 *						7 *				
Engineering													
CREC Subtotal			154						146				
Technical High Schools													
Bullard-Havens THS				29						27			
Cheney THS				88						83			
Goodwin THS				66						74			
Grasso THS				50						50			
Kaynor THS				93						91			
Norwich THS			83						85				
O'Brien THS				70						62			
Platt THS				87						89			
Prince THS				52						50			
Vinal THS				77						69			
Whitney THS				55						24			
Wilcox THS			93						93				
Abbott THS			88						65				
Wolcott THS			86						65				
THS Subtotal			350	667					308	619			
USD #2 Schools													
Solnit North		3	8	9	7								
Cady (CJTS)	I	2	7	5	6	3	ı	I	8	7	7		
USD #2 Subtotal	I	5	15	14	13	3							
Total	I	5	519	681	13	3	I	I	8	7	7		

Note: One DCF student did not report his grade in school. Hence, the grand total of entry surveys presented in Table 2 is 1,222 instead of 1,223. Academy of Aerospace and Engineering entry and exit questionnaires were submitted to the evaluation team late and were thus excluded from the analyses presented in this report.

At the time of the entry survey administration in the winter of 2014/2015, the average age of participating students was 15 years, with a range from 13 to 18. CREC students were 14 years old on average, with a range from 13 to 16 years; THS students were 15 years old on average, with a range from 13 to 18 years; lastly, USD #2 students were 16 years old on average, with a range from 13 to 19 years.⁴

In terms of ethnic background, about 36% of students reported that they were of Latino/a heritage, 59% indicated that they were not Latino/a, and 5% did not provide an answer. In terms of race, close to half of students (47%) self-identified as White, 15% as Black or African American, 11% as multiracial, 2% as Asian, 1% as Native Hawaiian or other Pacific Islander, and 1% as American Indian. Nearly one quarter of students did not report their racial background. An overwhelming majority (92%) of those self-identified as Latino/a. This finding suggests that missing data on the race question stem, in large part, from Latino youth who might not have considered ethnicity and race to be distinct aspects of social categorization.

Within school systems, there was some variability in the distribution of ethnicity and race. Approximately one third of both CREC (32%) and THS students (36%) identified as Latino/a. In contrast, almost half of USD #2 students (48%) reported Latino/a as their ethnicity. A majority of CREC students identified as Black or African American (36%); this was followed by White (21%), multiracial (20%), and Asian (5%). Among THS students, over one half identified as White (52%); others identified as Black or African American (12%) and multiracial (9%). Among USD #2 students, 23% identified as White, 21% identified as Black or African American, 15% as multiracial, 2% as American Indian, and 2% as Native Hawaiian.

About 60% of participating students were boys and about 39% were girls. Fourteen out of 1,223 students (1%) did not report gender. Among CREC students, gender was equally distributed; among THS students, the boys outnumbered girls by a 3 to 2 ratio; lastly, all USD #2 students were boys.⁵

In terms of sexual orientation, 88% of students reported that they were straight; 5% reported that they were bisexual; 2% chose the "something else" category; 2% selected multiple categories of sexual orientation; and 1% reported that they were gay or lesbian. The distribution of sexual orientation categories was similar across school systems. The only notable exception to this observation was a relatively large proportion of missing responses among USD #2 students (12% of missingness) in comparison to THS and CREC students (2% and 0% of missingness, respectively).

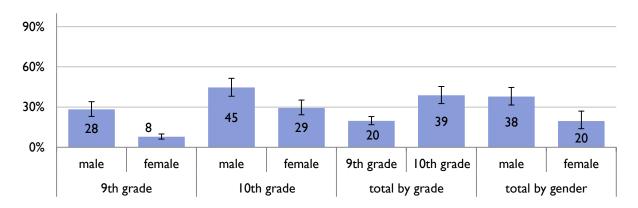
⁴ One CREC student, seven THS students, and one DCF student did not report their age.

⁵ Solnit North and Cady are attended by boys and young men only.

On entry surveys, about 31% of students reported that they intended to have sexual intercourse in the six-month period following survey administration. In contrast, 68% of students reported that they did not intend to have sexual intercourse, and 15 out of 1,223 students (1%) did not answer this question.

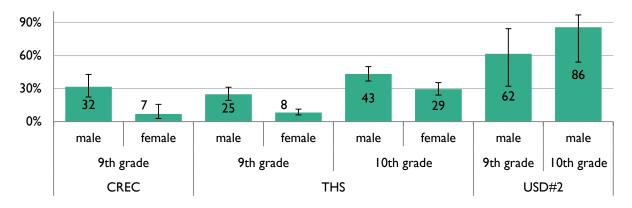
Figures 3 and 4 show proportions within grade, gender, and school system of 9th and 10th grade students who reported an intention to have sexual intercourse in the near future.⁶ Within each grade, a greater proportion of boys than girls reported an intention to have sex. Additionally, a greater proportion of 10th relative to 9th grade students reported an intention to have sex.

Figure 3. Percentage of 9^{th} and 10^{th} grade students who reported an intention "to have sexual intercourse in the next six months": By grade and gender (n = 1,200)



Note: Error bars represent 95% confidence intervals based on robust standard errors adjusted for clustering.

Figure 4. Percentage of 9^{th} and 10^{th} grade students who reported an intention "to have sexual intercourse in the next six months": By grade, gender, and school system (n = 1,200)

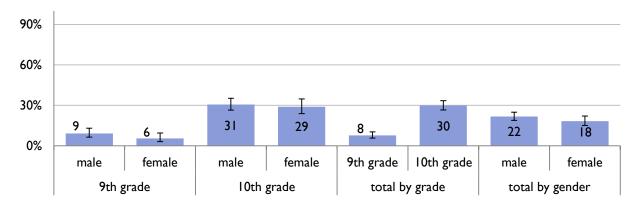


Note: Error bars represent 95% confidence intervals.

⁶ To protect participants' confidentiality, breakdowns by grade and gender exclude students in grades 7, 8, 11, and 12, because of small numbers.

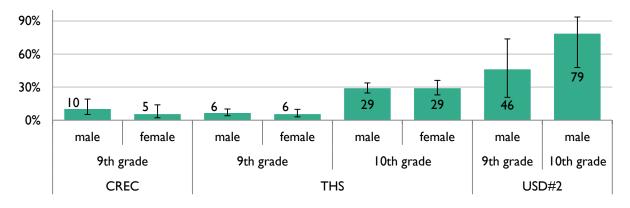
About 21% of participating students reported on entry surveys that they had had sexual intercourse at some point in their lives; about 3% declined to answer this question. Figures 5 and 6 show breakdowns by grade, gender, and school system in the proportion of 9th and 10th grade students who reported on entry surveys that they were sexually experienced. Differences by gender were not statistically significant, whereas differences by grade were. Namely, a higher proportion of 10th graders than 9th graders reported that they had sexual intercourse at some point in their lives. Additionally, it is worth noting that a higher proportion of USD #2 students than CREC or THS students reported that they had ever had sexual intercourse.

Figure 5. Percentage of 9^{th} and 10^{th} grade students who reported that they had sexual intercourse at some point in their lives: by grade and gender (n = 1,200)



Note: Error bars represent 95% confidence intervals based on robust standard errors adjusted for clustering.

Figure 6. Percentage of 9^{th} and 10^{th} grade students who reported that they had sexual intercourse at some point in their lives: by grade, gender, and school system (n = 1,200)

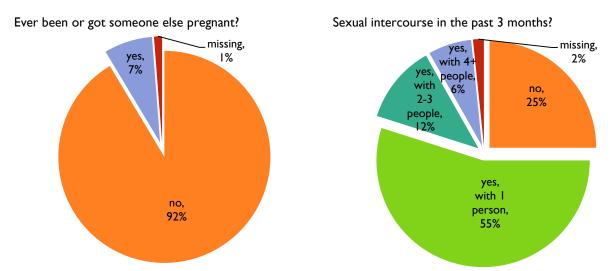


Note: Error bars represent 95% confidence intervals.

The left panel on Figure 7 shows pregnancy data among sexually experienced 9th and 10th grade students. About 7% of students—that is, 18 out of 214—reported that they had ever been (or had gotten someone else) pregnant. The right panel on Figure 7 shows recent sexual activity

among sexually experienced 9th and 10th grade students. As shown, about 73% of sexually experienced students reported that they were sexually active at the time of the entry surveys (defined as having had sexual intercourse with one or more people in the prior 3 months); in contrast, about 25% of sexually experienced students reported that they were not sexually active at the time of entry surveys.7 Notably, nearly 20% of sexually experienced students reported having had sex with more than one person in the 3-month period prior to the entry surveys.

Figure 7. Pregnancy (left panel) and current sexual activity (right panel) breakdowns among sexually experienced 9^{th} and 10^{th} grade students (n = 244)



The use of birth control and condoms among 9th and 10th grade students who were sexually active at the time of entry surveys is presented in Figure 8. The left panel shows data on the use of birth control, which was defined on entry surveys as "birth control pills, condoms, the shot (Depo Provera), the patch, the ring (NuvaRing), IUD (Mirena or Paragard), or implant (Implanon)." As illustrated, a majority of students (40%) reported that they used birth control consistently—that is, "all of the time." That said, about one third of students (34%) reported that they did not use birth control at all. The right panel on Figure 8 shows self-reported consistency—or lack thereof—in the use of condoms. Nearly half of students (48%) reported that they used condoms consistently, which is to say "all of the time." Just under one fifth of students (18%) reported that they didn't use condoms at all.8

⁷ Removing the 18 USD #2 students from this tabulation did not substantially change the frequencies in Figure 7, right panel.

⁸ Considering the definition of "birth control" provided to participants and the pattern of responses to the two questions—one about the use of birth control, the other about the use of condoms (Figure 8)—it would appear that a number of students did not consider the definition of "birth control" when answering the question about its use. It is possible that at least some students understood "birth control" as a reference to "birth control pills." If that is the case, entry survey responses do not provide a reliable estimate of the proportion of sexually active students who did not use any means of pregnancy prevention in the 3-month period prior to survey administration.

Figure 8. Use of birth control (left panel) and condoms (right panel) among 9^{th} and 10^{th} grade students who were sexually active at the time of entry surveys (n = 179)

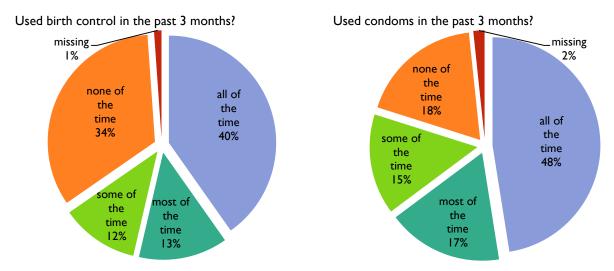
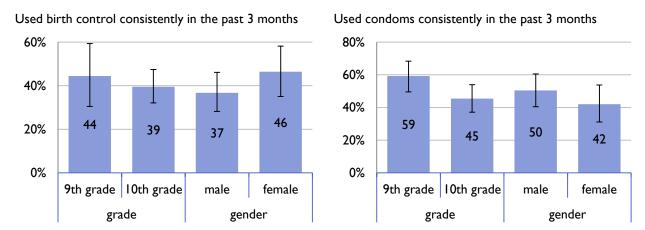


Figure 9 shows breakdowns by grade and gender in the use of birth control and condoms among sexually 9th and 10th grade students. A greater proportion of 9th than 10th grade students reported consistent use of birth control (left panel) and condoms (right panel). A greater proportion of girls than boys reported consistent use of birth control (left panel); however, a greater proportion of boys than girls reported consistent use of condoms (right panel). Breakdowns by school system are not provided in order to protect participants' confidentiality.

Figure 9. Percentage of sexually active 9^{th} and 10^{th} grade students who reported consistent use of birth control (left panel) and condoms (right panel): by grade and gender (n = 179)



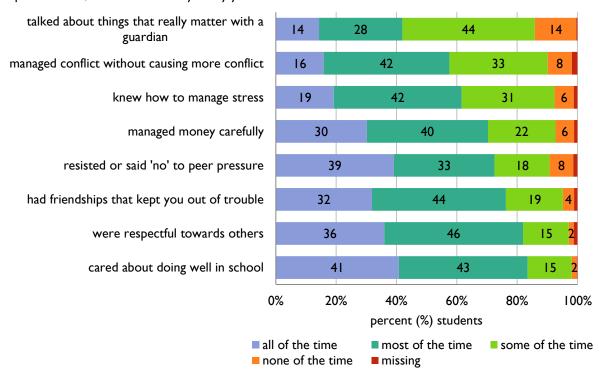
Note: Error bars represent 95% confidence intervals based on robust standard errors adjusted for clustered errors.

Figure 10 shows measures of preparation for adulthood. An overwhelming majority of students (≥ 70%) reported on entry surveys that they cared about doing well in school, were respectful toward others, had friendships that kept them out of trouble, resisted peer pressure, and managed money carefully "all of the time" or "most of the time." That being said, two domains

of student wellbeing present some level of concern. These include talking with guardians or parents about important issues and managing conflict. About 14% of students reported that they didn't talk with parents or guardians about "things that really matter." Another 44% reported that they talked with parents or guardians only "some of the time." With conflict management, about 8% of students reported that they were not able to manage conflict successfully and another 33% reported that they were able to manage conflict without causing more conflict only "some of the time." Breakdowns by the school system are provided in the Appendix.

Figure 10. Adulthood preparation on program entry (n = 1,223)

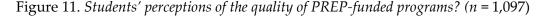
In the past 3 moths, how often would you say you...



Students' Perceptions of Program Impact

Students' Satisfaction with PREP-Funded Programs

Figures 11 shows measures of students' satisfaction with PREP-funded sexual education programs, as reported on exit surveys. Over half of students (58%) reported that they felt interested in program sessions and classes either all or most of the time, and about a quarter of students (26%) reported that they were interested at least some of the time. An overwhelming majority of students reported on exit surveys that program discussions or activities helped them learn (77%), that the material presented was clear (82%), and that they had a chance to ask questions (75%). Frequencies within each schools and school medians with graphic representations of dispersion are available in the Appendix.



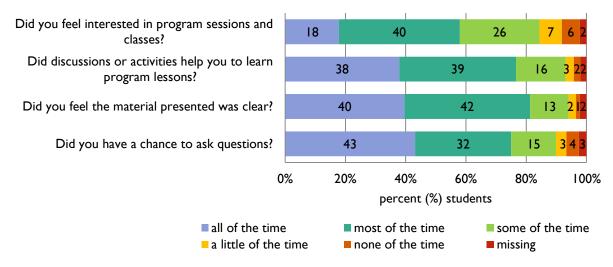
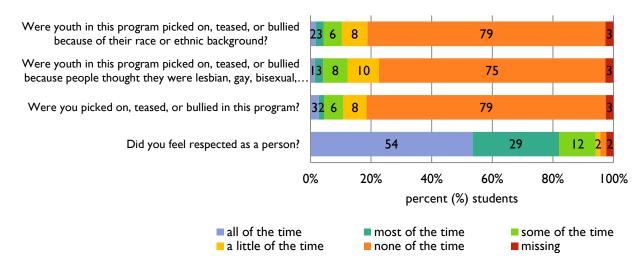


Figure 12 shows students' perceptions of the learning environment within PREP programs. An overwhelming majority of students reported that youth in their program were NOT picked on because of race/ethnicity (79%) or sexuality (75%). That said, a sizeable minority (~11%) reported that youth in their program were teased at least occasionally based on these factors. Similarly, a large majority of students (79%) reported that they personally were NOT picked on, teased, or bullied in the program, and that they felt respected as a person (83%); however, about 11% reported being bullied at least occasionally and 4% reported that they did not feel respected as a person. Breakdowns by the school are provided in the Appendix.

Figure 12. Students' perceptions of learning environment within PREP-funded programs? (n = 1,097)



In response to an open-ended question about experiences in their PREP-funded sexual education program, 80% of students provided a written comment. A majority of these comments (64%) were positive in nature. Of the remaining comments, about 22% referenced both positive and negative aspects of the program; about 7% were negative; and 6% were neutral. A thematic analysis of the comments revealed four key themes: (1) Sexual education in schools can be a site of learning; (2) students value interesting educational experiences; (3) a comfortable environment is important; and (4) educational tools matter.

Sexual Education in Schools Can Be a Site of Learning

Perhaps not surprisingly, students emphasized learning in their comments about PREP. Although some students reported that they did not learn anything new from the program (10)⁹ or that the program did not cover enough (3), a large majority (224) described their classes as truly educational. For many, learning was a matter of acquiring new information:

I liked that I learned a lot about sex and STD's [sic] and pregnancy.

I learned all the risks to having sex and how big of an impact it can have on your life. I liked learning about the different types of birth control and ways to not getting STD's [sic] and pregnant.

For some, learning also involved consideration of how to apply the new information to their own lives:

It was really helpful for me. It made me think about my health and future.

⁹ Number of comments relating to each category is presented in parentheses.

It made me think twice before I did something. I liked everything I learned. I learned how to protect myself for when I choose to have sex.

Another prominent aspect of learning was a realization that change had taken place in one's knowledge about sexual health:

It was good because now I know a lot more than before.

This helped me in my life because now I know how to be careful against STD's [sic].

Students Value "Fun and Interesting" Educational Experiences

A second theme depicts students' appreciation of "interesting" as opposed to "boring and repetitive" educational experiences. Of those who commented on this aspect (100), an overwhelming majority described PREP lessons as "interesting," "fun," or "fun and interesting" (85). In contrast, a few students characterized their classes as boring (10) or repetitive (5).

For some students, new information about sexual health was appealing in and of itself. It was an opportunity to acquire useful knowledge—especially knowledge that is applicable to day-to-day life—that made PREP sexual education classes interesting and, as they put it, fun to students:

Participating in the sexual education program was interesting. We learned about STD's [sic] and HIV. Also how to prevent it and pregnancies.

It's been a blast. I had fun while learning about real life situations. The class has taught me a lot of things. Next time I am about to have sexual intercourse I am going to use a condom.

Attention-grabbing activities were another aspect of programming that made PREP classes interesting. Such activities staved off boredom, which helped with maintaining focus and integrating new information into existing knowledge. Typical responses were as follows:

This program was interesting even though I knew mostly everything that was being taught before this program. However, the activities were fun to participate in and absorb more knowledge on the subject than before.

I like it, it was fun and the material presented itself in games or activities to grab our attention into the topics.

Opportunities to interact with the teacher and with other students were yet another antidote to boredom. Involvement with others through conversations and activities—as opposed to "reading out of a book"--facilitated engagement with the material and, with it, learning.

It was pretty fun, we did a lot of open discussions and it really helped me learn the material.

Very different from my old school. It was very interactive and open to questions which was good.

A Comfortable Learning Environment is Important

A third theme centered on the comfort of the environment in which conversations about sexual health were to be held. A number of comments (84) reflected thoughts about comfort, discomfort, and shades of awkwardness in between. Some students emphasized comfort (6) as if to suggest a baseline expectation of discomfort:

It has been a great pleasure being in this health class. [...] This environment was great to learn in. I was comfortable with my peers around me and the teacher who taught me.

I liked that it was a very relaxed and comfortable environment. The teachers were understanding and the students were too.

Others acknowledged awkwardness or discomfort at the beginning of the program (7), but implied that they experienced a growing sense of comfort as time went on:

It is a little awkward but then you get over it, it becomes more fun and useful.

At first it felt weird/awkward, because no one was comfortable talking about it. After a while it got better and I liked it all because it was teaching us things we need to know.

Being able to ask questions (12) that are generally not discussed in public was an important sign of a comfortable environment:

It was really good to participate in this program because I was able to learn more about sex and ask the questions that I needed to ask.

In my personal opinion, I genuinely enjoyed my class and my teacher was amazing with explaining and not making any of our discussions uncomfortable or not giving enough information or not answering any questions. I learned a lot and will carry on what I have learned throughout my life.

As might be expected, teachers (12) and peers (16) were instrumental in generating comfort—or lack thereof. Teachers' openness to students' questions created a positive learning environment: "The class is enjoyable to have and be able to ask the teacher things that I couldn't to others." That teachers did not hold back information was also helpful: "It makes me feel like an adult cause he taught us real like and didn't keep anything back." Another important factor was having peers who were "mature" and ready to learn about sexual health: "All the students and me had a lot of questions and were mature to the topic."

Conversely, peers not taking the lessons seriously or teasing one another about a lack of knowledge of sex slang produced discomfort. Another bothersome practice was being treated by teachers as if they were middle school students rather than young adults: "It felt like middle school health to be honest, that's what I didn't like." The last salient source of difficulty was the treatment of gender and sexuality in class discussions and program materials (7). On one end, there were students who, under the assumption of two mutually exclusive gender categories, would have preferred gender-specific instruction and who felt uncomfortable with learning about sexual health in a co-ed setting: "I don't like how most of the program is co-ed. It's hard to talk to the opposite gender." On the other end, there were students who were dismayed by a lack of space for gender fluidity and the assumption of obligatory heteronormativity: "I am sad that the Connecticut Department of Health doesn't consider students that aren't straight in any of your lessons, activities, or videos. Our protection matters too although there are many differences."

Although most students (36) expressed comfort with their PREP sexual education, if not at the beginning then after they got used to it (7), for some students (26) sexual education continued to be awkward and uncomfortable past the first few lessons. Some viewed this awkwardness as a normal aspect of conversations about sex, especially if such conversations are to be held in school settings. Others experienced awkwardness only at certain times or with respect to certain aspects of instruction (11):

Being able to participate in a sexual education program in my school has been good. I have learned many ways to prevent bad things and felt uncomfortable some of the times but still had fun learning and the teacher was an amazing teacher.

Some things were really embarrassing, but I think it was good to talk about everything.

Judging by their written comments, few students (3) experienced outright discomfort with their PREP program. No comments included references to past sexual trauma.

Educational Tools Matter

The final theme highlights educational tools and materials that were part of the two evidence-based curricula under study: *Be Proud! Be Responsible!* and *Reducing the Risk.* Both curricula included a variety of activities, short videos, role plays, and a condom demonstration. Students across the schools (43) expressed great appreciation of activities that were used to impart knowledge:

I got to work in groups to learn how to react to situations and did many activities. I did enjoy the learning method. I can now understand things clearer.

I think it is very important to learn about the sexual education presented in this program. I liked everything about this program. Mostly the class activities because it helped us all learn better.

Students highlighted learning about condoms and the condom demonstration activity (21) as an especially useful activity.

My favorite was how they showed us how to use a condom. I think this is a very important skill for the future.

It was a good source of education. We learned how to use condoms the right way.

That said, a few students (4) expressed a dislike of the condom demonstration activity even as they recognized the value of learning about condoms: "I did not really [like], or feel comfortable seeing the condoms, and learning how to put them on, but I know it was for my own good."

In addition to highlighting the condom demonstration, students in *Be Proud! Be Responsible!* classes emphasized short videos in their comments (28). A majority of them (21) liked the videos and found them to helpful in understanding the material:

I liked all the examples and videos used in the program because it shows that real situations do occur.

I liked the videos they were funny and made me learned a lot.

Some (7), however, disliked the videos because they saw them as cheesy and unrealistic. The sole *Reducing the Risk* comment on the videos was negative.

The last salient category within the educational tools theme concerned role plays. Students were divided on how they saw this aspect of the two curricula. Some (7) found role plays to be helpful and expressed a desire for "more scenarios than writing." Others (5) disliked them.

Students' Perceptions of PREP Impact on Sexual Activity

Figure 13 shows students' perceptions of the PREP-funded program's impact of their intentions to have sexual intercourse in the 6-month period following exit survey administration. About 48% of students reported that being in the program made them much or somewhat less likely to have sexual intercourse; about 35% of students felt that the program did not influence them either way; and, about 15% of students reported that being in the program actually made them more likely to have sexual intercourse. Breakdowns by the school are available in the Appendix.

Figure 13. Students perceptions of PREP impact on intention to have sexual intercourse in the 6-month period following exit surveys (n = 1,097)

Would you say that being in the program has made you more likely, about the same, or less likely to have sexual intercourse in the next 6 months?

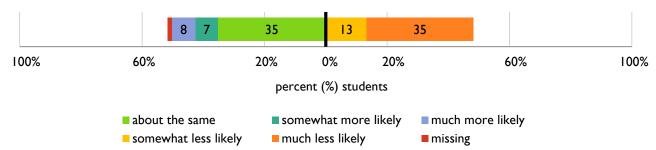
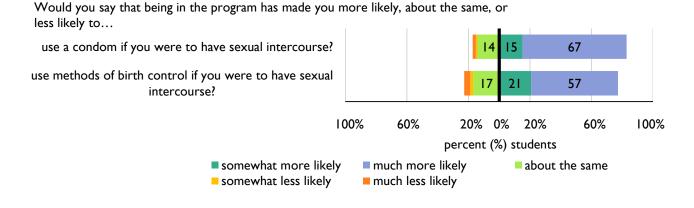


Figure 14 shows students' perceptions of the PREP programs' impact on their intention to use methods of birth control in general and condoms in particular among students who provided an applicable response to these questions (733/1097). The results show that a large majority of students perceived their PREP program to have a positive impact on their intentions to use methods of birth control and condoms. About 14-17% of students reported that their PREP program did not have an impact on their intentions to use birth control and condoms, and very few (\leq 6%) reported a perceived negative impact.

Figure 14. Students perceptions of PREP impact on intention to use methods of birth control if they were to have sexual intercourse in the 6-month period following the exit surveys (n = 733)



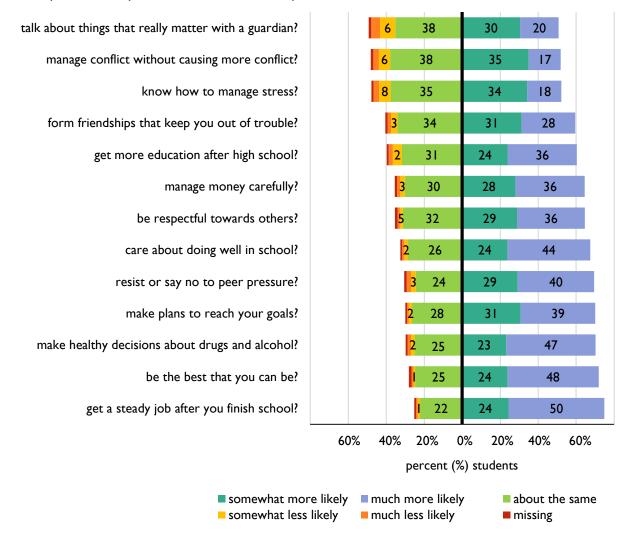
¹⁰ In response to the two questions about students' perceptions of PREP's impact on the intended use of contraception, about 30% of students reported that they intended to abstain in the 6-month period following the exit surveys. What's more, about 4% of students provided inconsistent responses to the two questions: marking "I will abstain" in response to one question and marking something else in response to the other question. Inconsistent responses to the two questions were set to missing. Both missing and "I will abstain" responses were excluded from frequencies presented in Figure 14—hence the total number of students being 733 instead of 1,097.

Students' Perceptions of PREP Impact on Adult Preparation

Figure 15 shows students responses to a series of questions about PREP's perceived impact on adulthood preparation. A majority of students reported that their PREP program did in fact positively influence the acquisition of life skills and attitudes that would prepare them for adulthood.

Figure 15. Students' perceptions of PREP impact on adulthood preparation (n = 1,097)

Even if your program didn't cover a topic, would you say that being in the program has made you more likely, about the same, or less likely to...



Conclusions

The 2014/2015 implementation of PREP-funded sexual education programs in Connecticut's high schools proved to be a relatively successful endeavor. *Be Proud! Be Responsible* and *Reducing the Risk* curricula were taught in the context of health education classes in three CREC schools, two USD #2 schools, and fourteen Technical High Schools throughout the state. Programs were completed in their entirety in all but one school. Additionally, the available data suggest that lessons were generally taught in the specified sequence.

A large majority of teachers reported that they were adequately prepared to teach PREP lessons. Additionally, teachers reported that they were confident in their ability to deliver the lessons and to create a positive and engaging environment. That being said, it is worth pointing out that not all teachers¹¹ filled out the questionnaire, which is to say that the information on how they delivered the lessons and how they felt about them was simply not available. What's more, it must be acknowledged that over one third of teachers who filled out the questionnaire reported being very uncomfortable with discussing sexual health topics with students. In future evaluations, it would be important to obtain responses from all teachers and to explore the linkage between teacher characteristics and student experiences in sexual education classes.

On the whole, participating students reported high levels of satisfaction with their PREP-funded classes: An overwhelming majority reported that their PREP program was truly educational, that class discussions and activities helped them learn, that the material presented was clear, and that they had a chance to ask questions. Further, most students reported that they were interested in program sessions, that they appreciated the interactive nature of program activities, and that they liked teachers' willingness to answer their questions and to do so without holding back information.

With that said, it is important to acknowledge that PREP classes were not a comfortable space for everyone. About 10% of students reported that they didn't feel respected as a person and about 5% that they were picked on, teased, or bullied in the program. Judging by students' written comments, salient factors in producing discomfort included a lack of readiness to learn among peers; teachers' treatment of high school students as if they were middle school students; and a lack of consciousness raising around gender and sexuality. At the very least, these findings suggest a need for additional guidelines and training on establishing and enforcing group agreements; tailoring classroom discussions to meet students' needs; and incorporating conversations about gender and sexuality into lessons on sexual health. Taking the need for improvement a step further, it would be important to address teachers' suggestions for program adaptations—including insufficient time to cover the curriculum AND adequately

¹¹ Four out of 19 teachers did not fill out the teacher questionnaire.

answer the multitude of students' questions; unrealistic role-plays (an observation also made by students); development of assessments to track student learning; inclusion of technology into curricula; and sequencing issues in *Be Proud! Be Responsible!*

Students' perceptions of PREP's impact on their intention to have sexual intercourse and their preparedness for adulthood indicate that PREP is generally seen to be an effective program. That is, most students reported that being in the program made them less likely to have sexual intercourse in the near future and more likely employ adulthood preparation life skills. Notably, there is variability across schools in students' perceptions of program effectiveness, as graphs presented in the Appendix show. It would be necessary for state and school administrators to explore the sources of variability at the level of schools (and classes).

Lastly, a large proportion of students reported on entry surveys that three domains of adulthood preparation—talking with parents or guardians about things that really matter, managing conflict, and managing stress—were problematic for them at least some of the time. Exit survey data showed that students saw PREP to be least effective with precisely these sets of life skills. These findings suggest the need for additional material to be incorporated into PREP lessons in order to address this area of need.

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Appendix

Figure A1. CREC student wellbeing in the three months prior to the entry survey (n = 154)

In the past three months, how often would you say you...

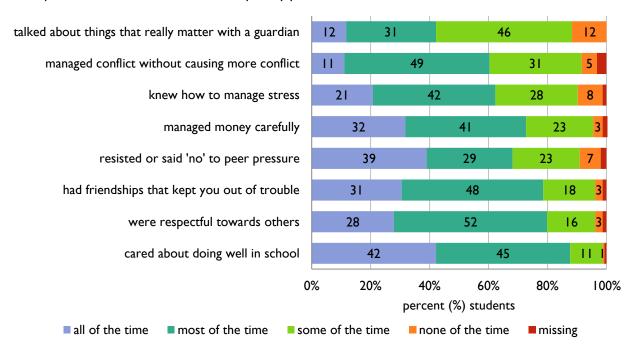


Figure A2. THS student wellbeing in the three months prior to the entry survey (n = 1,017)

In the past three months, how often would you say you...

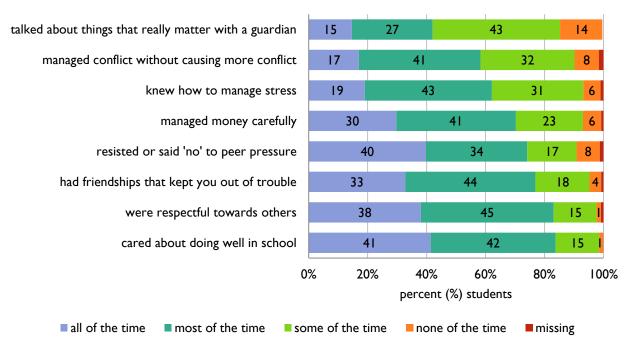


Figure A3. USD#2 student wellbeing in the three months prior to the entry survey (n = 52)

In the past three months, how often would you say you...

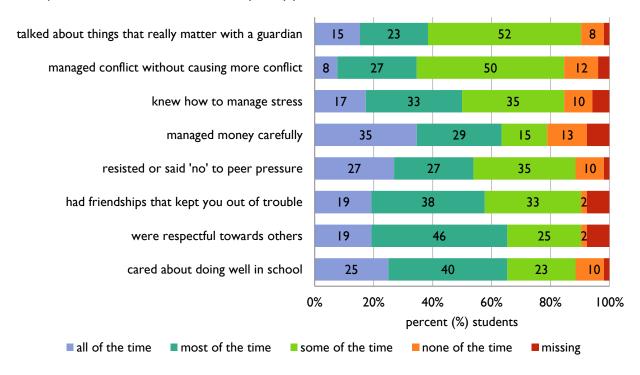


Figure A4a. "Did you feel interested in program sessions and classes?"

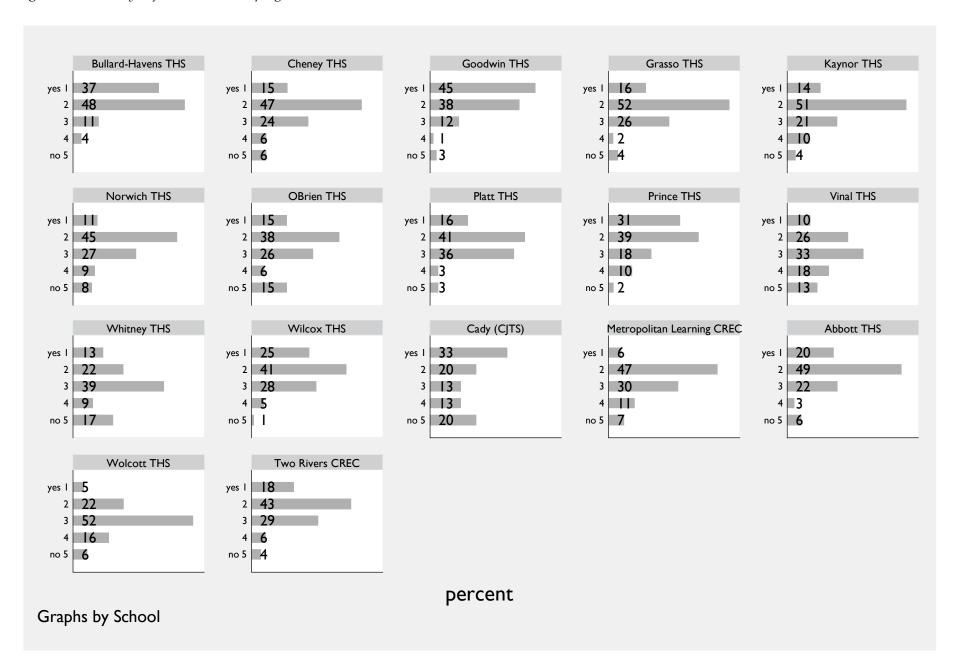


Figure A4b. "Did you feel interested in program sessions and classes?"

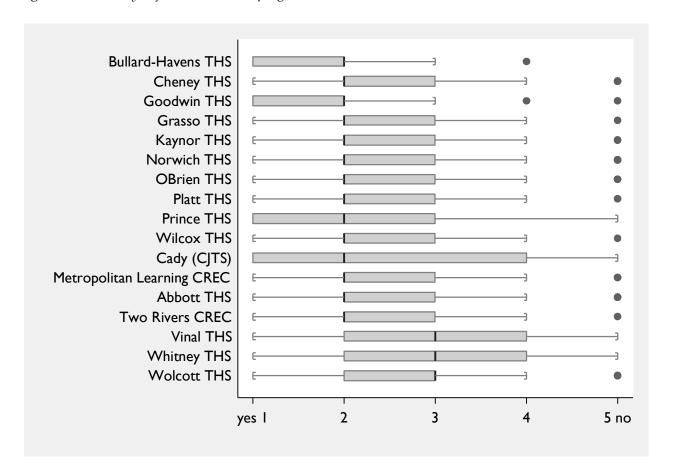


Figure A5a. "Did discussions or activities help you to learn program lessons?"

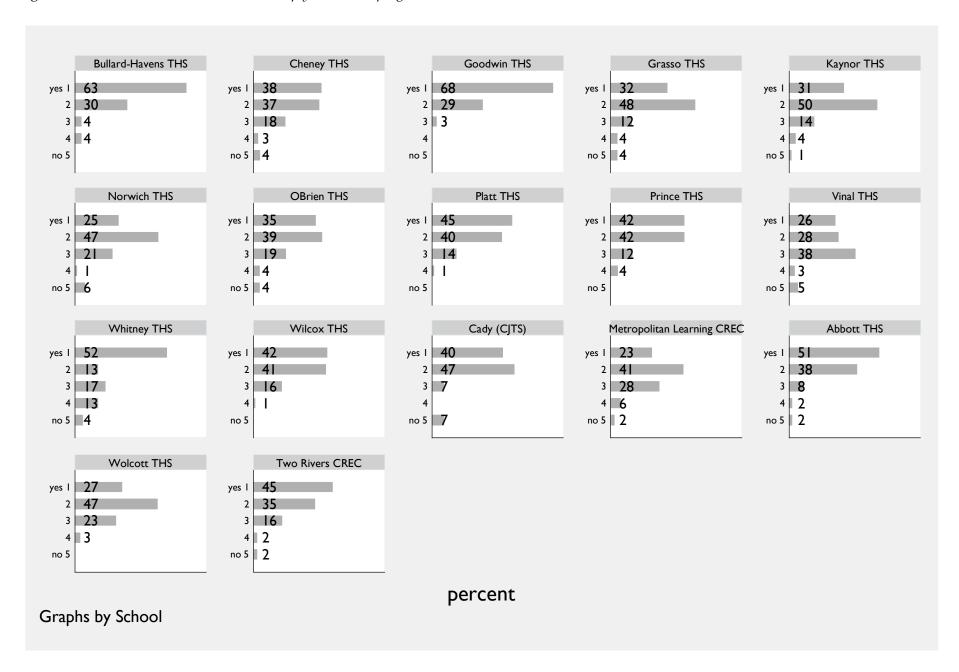


Figure A5b. "Did discussions or activities help you to learn program lessons?"

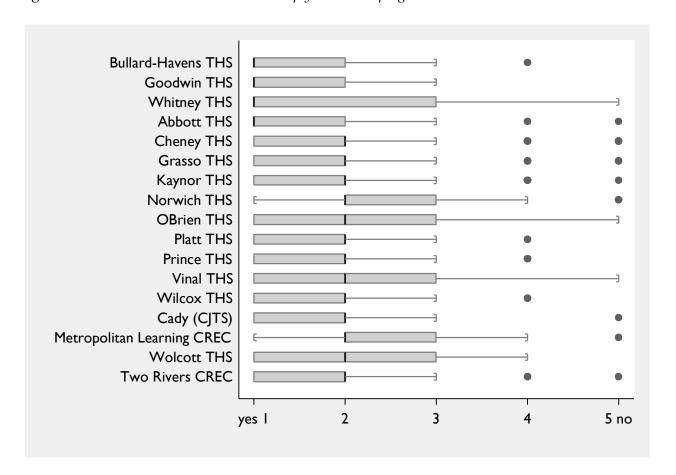


Figure A6a. "Did you feel the material presented was clear?"

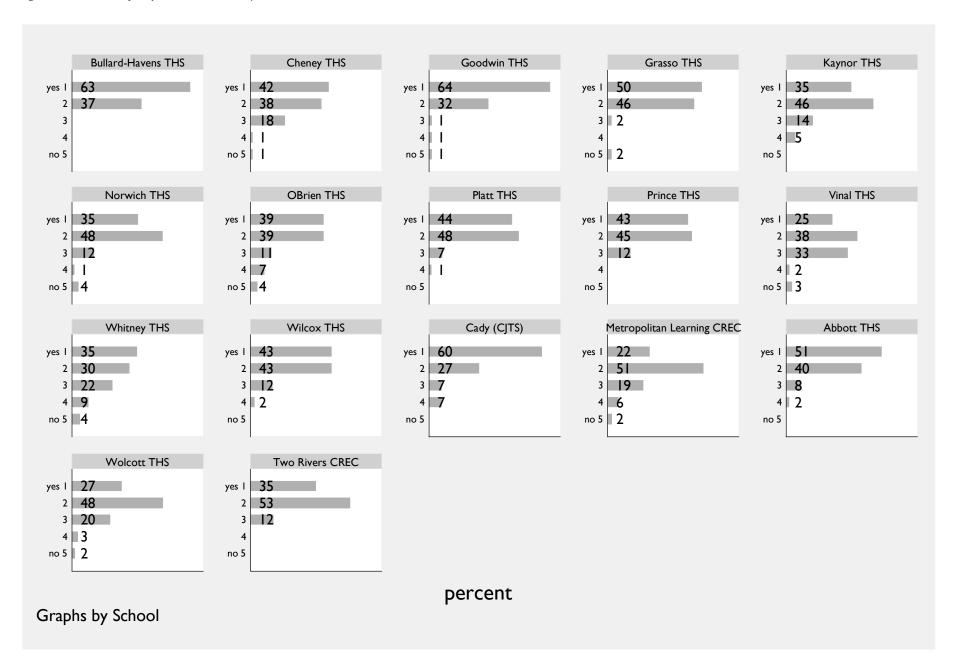


Figure A6b. "Did you feel the material presented was clear?"

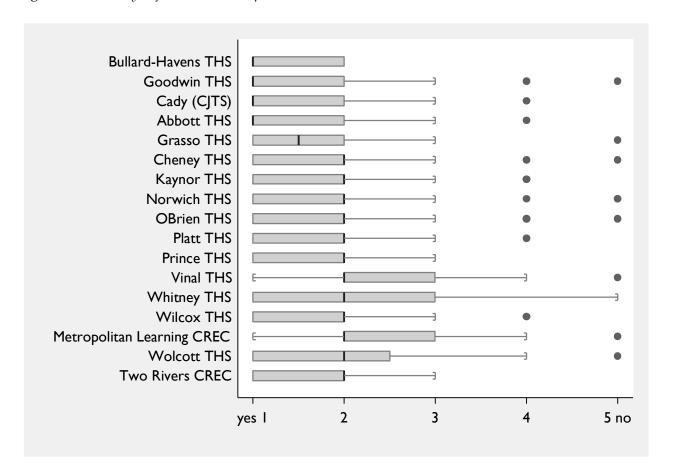


Figure A7a. "Did you have a chance to ask questions?"

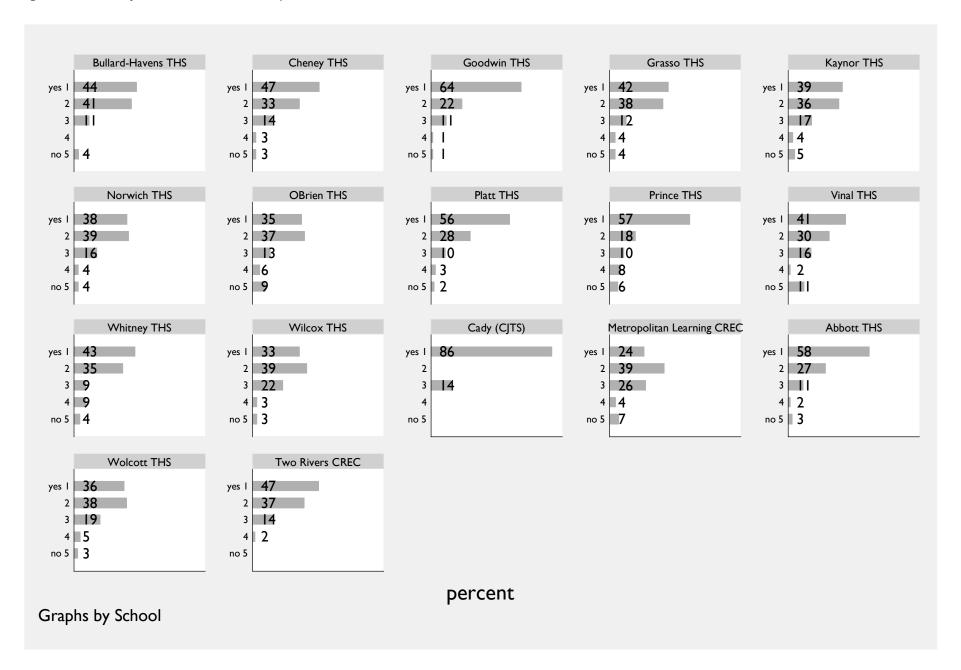


Figure A7b. "Did you have a chance to ask questions?"

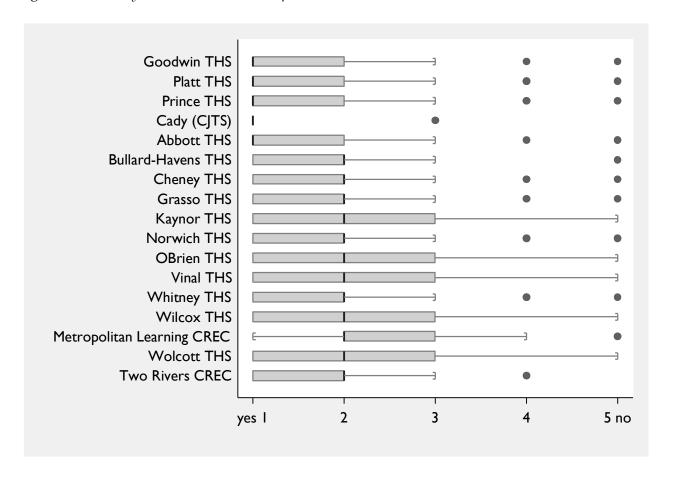


Figure A8a. "Were youth in this program picked on, teased, or bullied because of their race or ethnic background?"

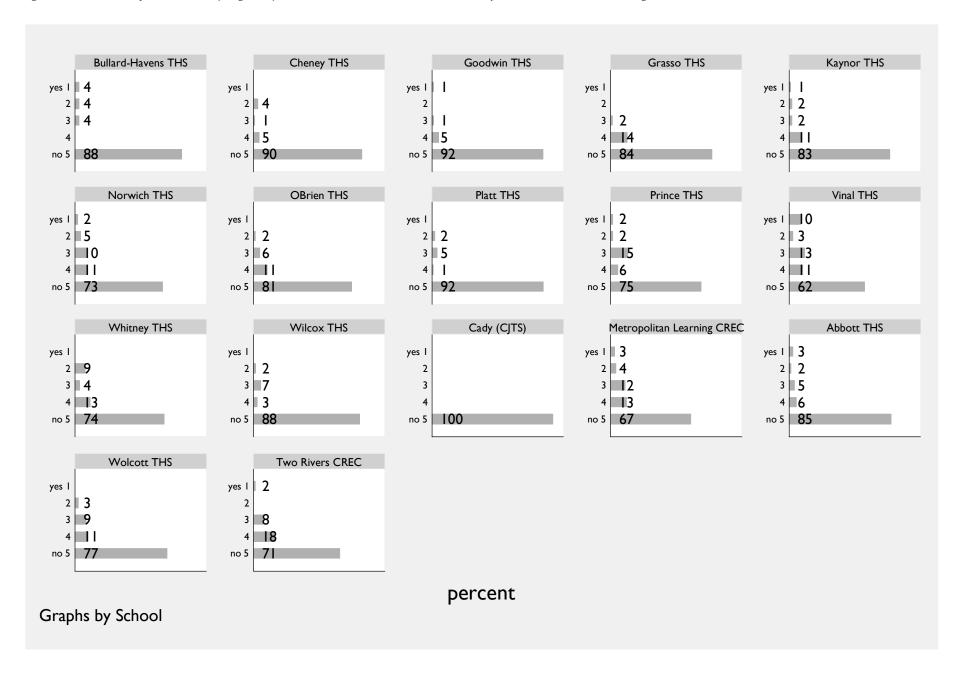


Figure A8b. "Were youth in this program picked on, teased, or bullied because of their race or ethnic background?"

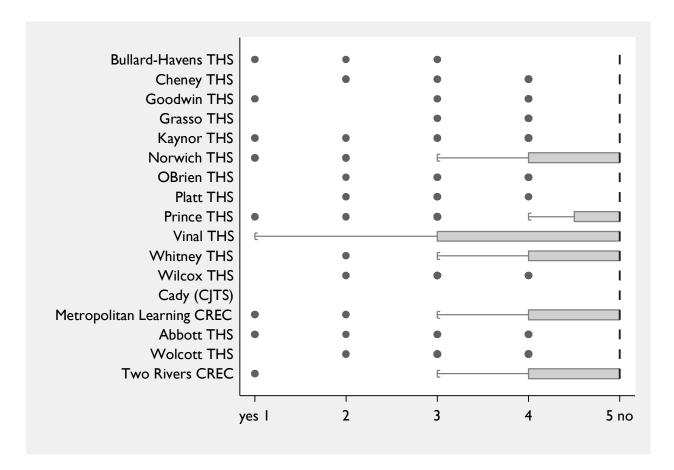


Figure A9a. "Were youth in this program picked on, teased, or bullied because people thought they were lesbian, gay, bisexual, or transgender?"

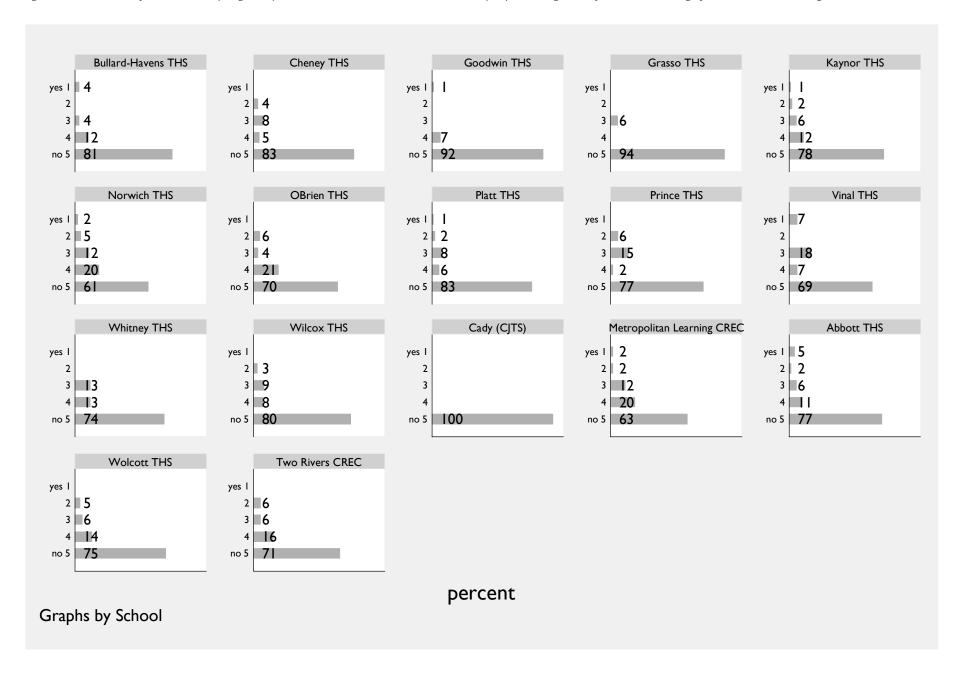


Figure A9b. "Were youth in this program picked on, teased, or bullied because people thought they were lesbian, gay, bisexual, or transgender?"

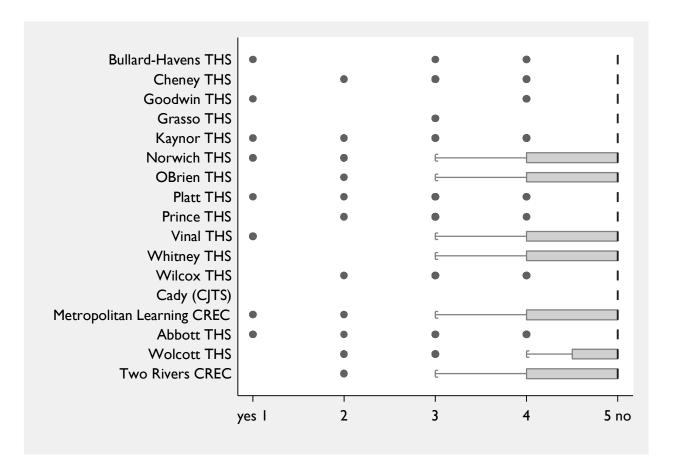


Figure A10a. "Were you picked on, teased, or bullied in this program?"

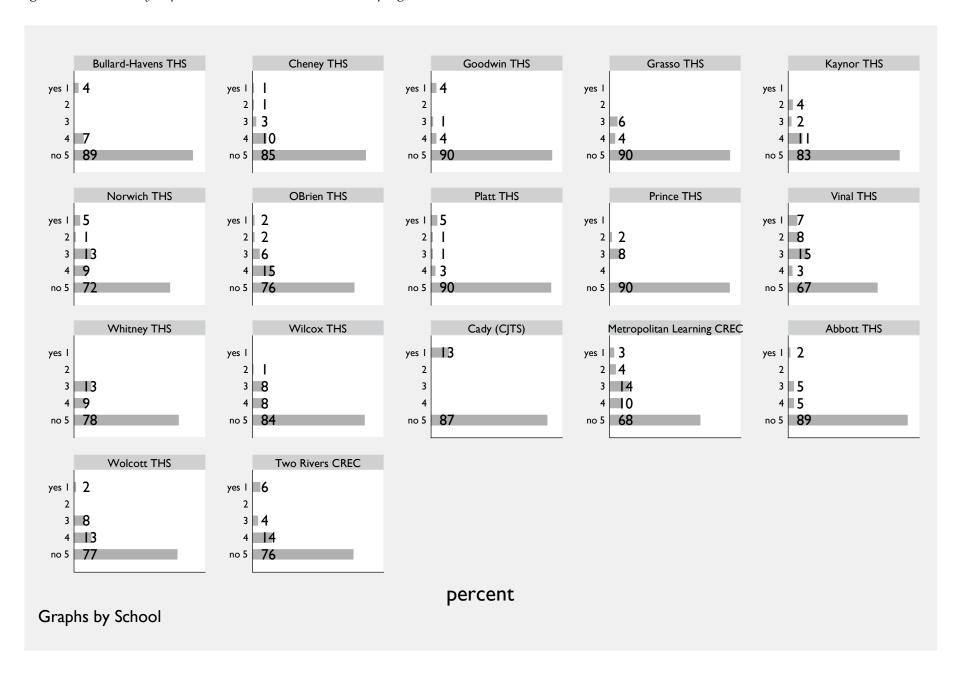


Figure A10b. "Were you picked on, teased, or bullied in this program?"

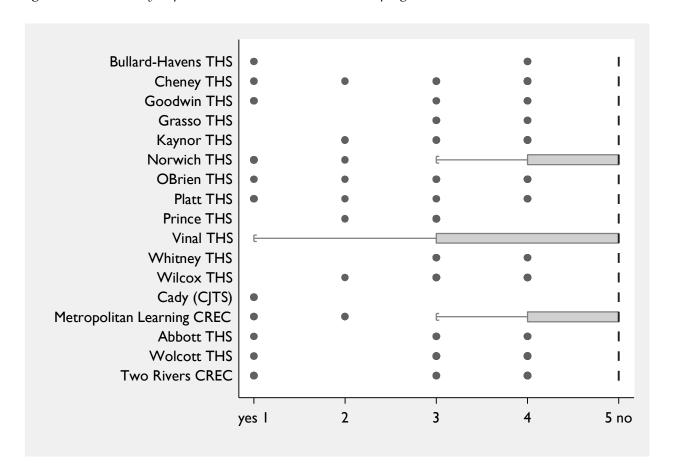


Figure A11a. "Did you feel respected as a person?"



Figure A11b. "Did you feel respected as a person?"

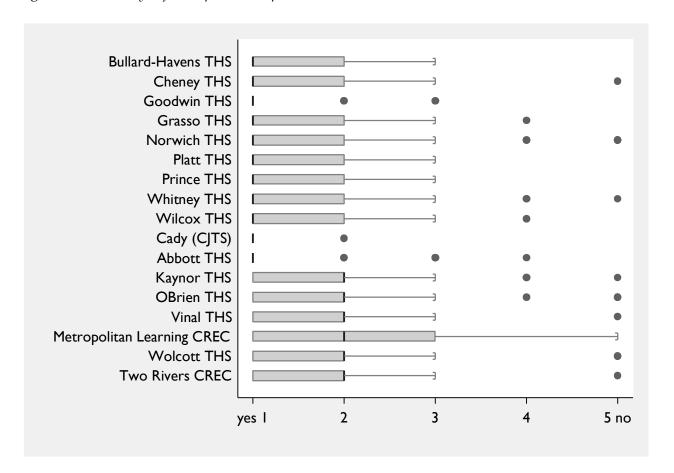


Figure A12a. "Has being in the program made you more or less likely to have sexual intercourse in the next 6 months?"

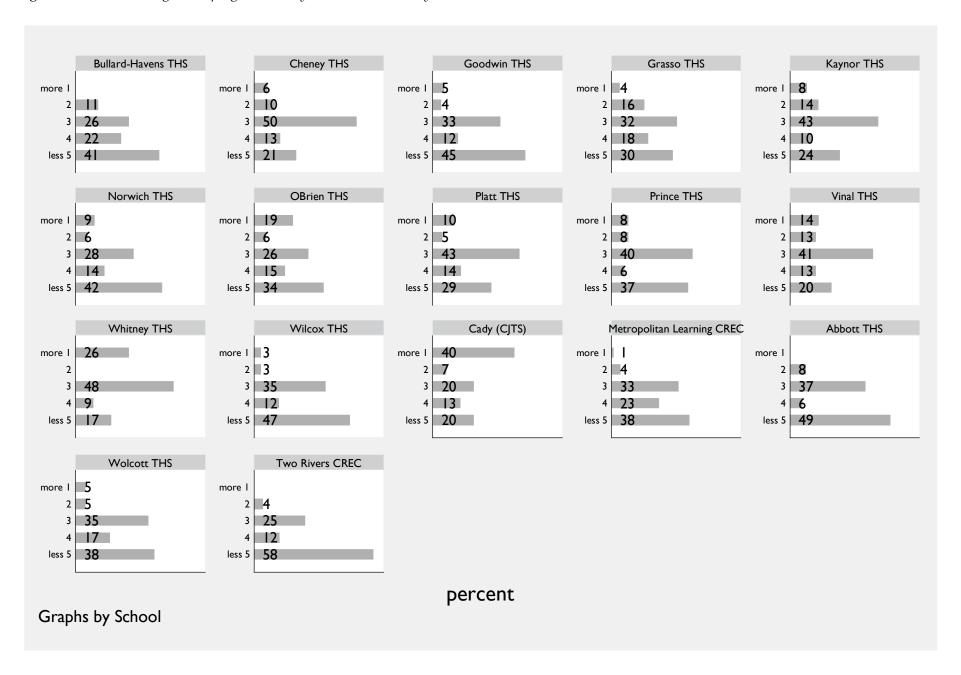


Figure A12b. "Has being in the program made you more or less likely to have sexual intercourse in the next 6 months?"

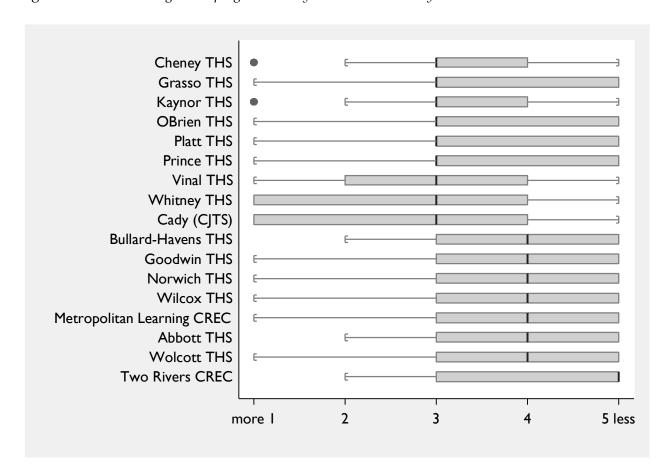


Figure A13. "Has being in the program made you more or less likely to manage conflict without causing more conflict?"

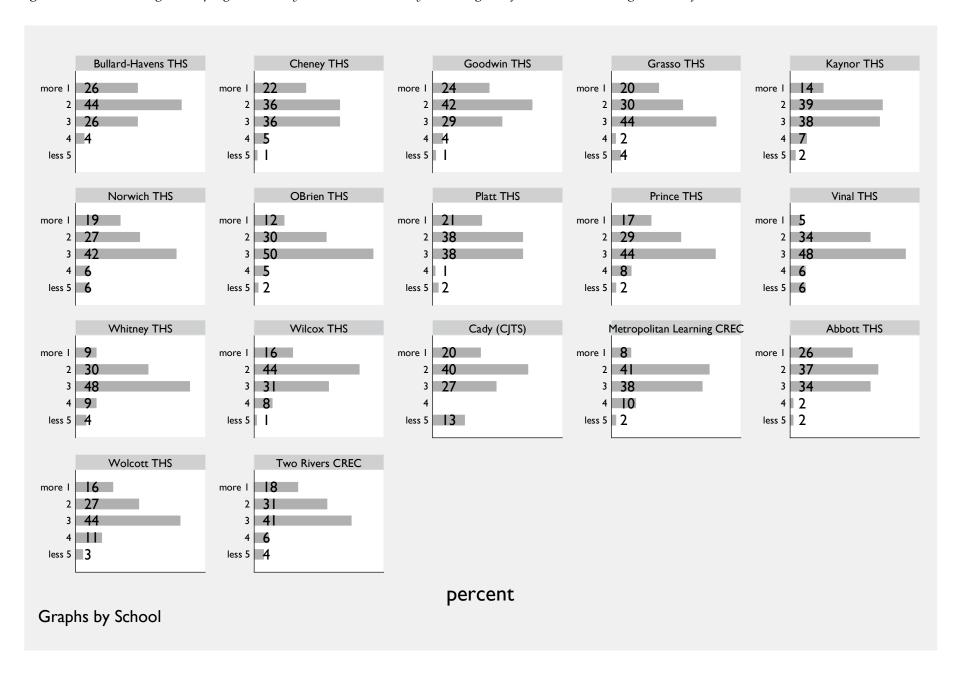


Figure A13b. "Has being in the program made you more or less likely to manage conflict without causing more conflict?"

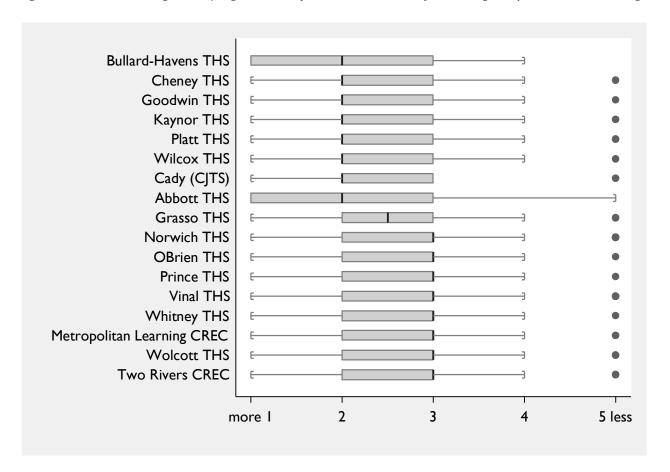


Figure A14a. "Has being in the program made you more or less likely to know how to manage stress?"

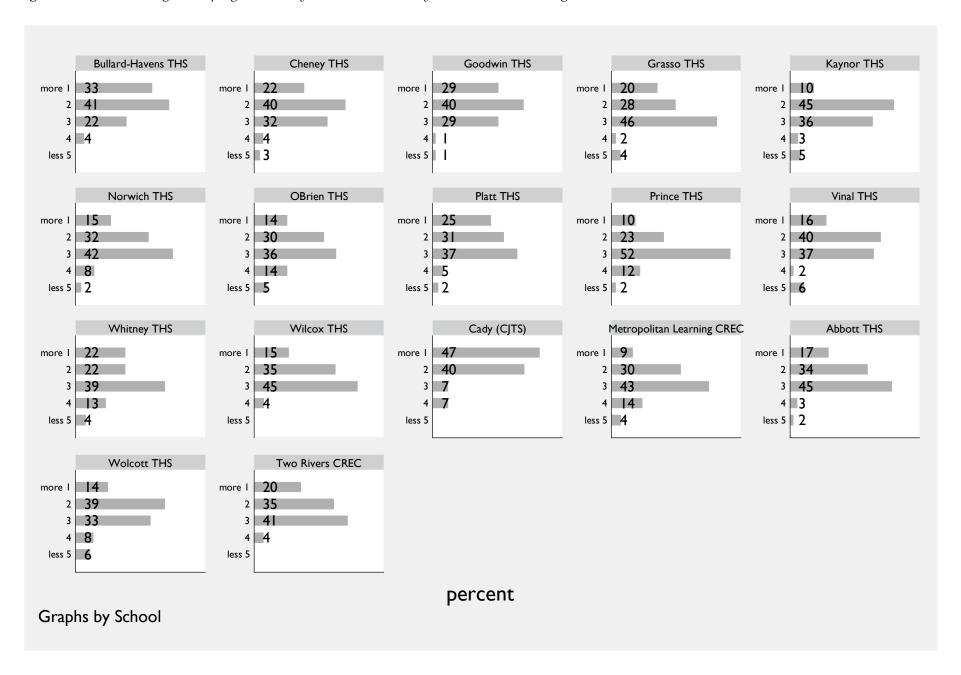


Figure A14b. "Has being in the program made you more or less likely to know how to manage stress?"

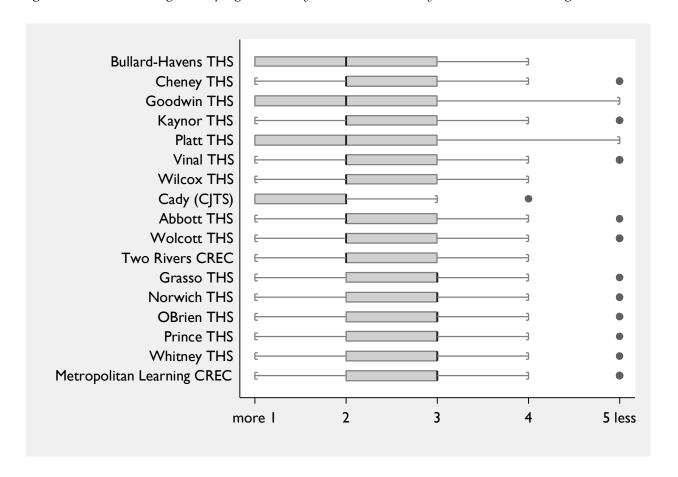


Figure A15a. "Has being in the program made you more or less likely to talk about things that really matter with a guardian?"

Bullard-Havens THS	Cheney THS	Goodwin THS	Grasso THS	Kaynor THS
more 1 41 2 11 3 3 3 4 19	more I 18 33 38 4 8	more I 29 34 3 27 4 7	more I 16 2 38 42 4 2	more I 2 I 2 2 7 3 3 7 4 9
less 5	less 5 3	less 5 3	less 5 2	less 5 6
Norwich THS	OBrien THS	Platt THS	Prince THS	Vinal THS
more I 15	more 1 22 2 31	more I 20 2 3 I	more I 17 2 27	more I 13 2 33
3 40 4 11	3 25 4 16	3 41 3	3 40 4 17	3 38
less 5	less 5	less 5	less 5	less 5
Whitney THS	Wilcox THS	Cady (CJTS)	Metropolitan Learning CRE	C Abbott THS
more I 26	more I 20 29	more I 27 2 33	more I 11 2 39	more I 20 2 34
3 30	3 42 4 5	3 27	3 33 4 8	3 38 4 5
less 5 17	less 5	less 5 13	less 5 8	less 5 3
Wolcott THS	Two Rivers CREC			
more I 28	more I 31			
3 31	2 31 3 27			
4 6 less 5 5	4 8 less 5 4			
		percent		
Graphs by School		-		

Figure A15b. "Has being in the program made you more or less likely to talk about things that really matter with a guardian?"

