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| **Name of Grant Program:** Partners for Youth Success: Personal Responsibility   Education Program (PREP) – Planning & Capacity  Building | **Fund Code:** 0716/0211 |

**Evidence-Based and Evidence-Informed Programs and Augmentation Descriptions**

Grantees will select from one of the following evidence-based or evidence-informed programs. These programs are to be implemented with fidelity and augmented with additional lessons to address required adulthood preparation subjects as needed.

**Evidence-Based Programs – Middle School**

***Get Real*** (augmented with additional lessons to address required adulthood preparation subjects)

For more information on Get Real: [Get Real (Middle School) (youth.gov)](https://tppevidencereview.youth.gov/document.aspx?rid=3&sid=274&mid=1)

**Program Summary**

Get Real (Middle School) is a 3-year curriculum for middle school youth designed to delay sex and increase correct and consistent use of protection methods when a person becomes sexually active. The program emphasizes responsible decision-making, applying the decision-making model to real-life situations, and increasing healthy communication with partners and family members on sexual health. Get Real is delivered in nine 45-minute lessons each in grades 6, 7, and 8.

**Target Population**

The program was designed and tested for youth in grades 6, 7, and 8.

**Program Setting**

The program was designed and evaluated as a classroom-based curriculum.

**Program Objectives**

The program seeks to delay sex and increase correct and consistent use of protection methods when a person becomes sexually active by:

* Connecting self-awareness, self-management, social awareness, and relationship skills to responsible decision making.
* Naming reasons abstinence is the healthiest choice for youth their age.
* Describing consequences of sexual activity and ways to reduce the risk of negative consequences.
* Applying a decision-making model to real-life situations.
* Demonstrating assertive communication and refusal skills for delaying sexual intercourse and avoiding unprotected sexual activity.
* Increasing their opportunities for conversations with their parents and other caring adults about personal, family and community beliefs about sexual health.

**Program Methods**

The program is delivered through brainstorming activities, games, discussion, skill practice, role play, guest speakers, short lectures, and group work.

***Making Proud Choices***(augmented for additional contraception information and adult preparation subjects)

For more information on Making Proud Choices: [Making Proud Choices! (youth.gov)](https://tppevidencereview.youth.gov/document.aspx?rid=3&sid=102&mid=1)

**Program Summary**

Making Proud Choices! A Safer Sex Approach to STDs, Teen Pregnancy, and HIV prevention program aims to provide young adolescents with the knowledge, confidence and skills necessary to reduce their risk of sexually transmitted diseases (STDs), HIV and pregnancy by abstaining from sex or using condoms if they choose to have sex. The curriculum consists of eight modules delivered by trained facilitators to young adolescents.

**Target Population**

The curriculum is designed for middle-school youth. It was evaluated with African American 11-13 year-olds in urban areas. The developer suggests the program can be used with older youth and with both same-sex or male and female groups.

**Program Setting**

The program was designed to be implemented in a variety of community settings, including schools or community-based organizations. The program was evaluated in an after-school, community-based setting

**Program Objectives**

The primary goals of Making Proud Choices! are to increase knowledge about prevention of HIV, STDs and pregnancy, reinforce positive attitudes/beliefs about condom use, and increase confidence in participants' ability to negotiate safer sex and use condoms correctly. The program works to lower the incidence of STD/HIV risk-associated sexual behavior among youth, by inculcating a sense of pride and responsibility among its participants, providing them with the knowledge and skills they need, and motivating them to make a difference in their lives.

**Program Methods**

Making Proud Choices! aims to create a youth-centered, positive learning environment. It utilizes role plays where all participants practice and receive feedback on their negotiation skills. The program also relies on small group activities, viewing and processing videos, visual presentations, and targeted instruction for multiple learning styles.

**Evidence-Based Programs – Middle School and/or High School**

***Teen Outreach Program (TOP)*** (augmented with additional lessons to address required adulthood preparation subjects)

For more information on TOP: [Teen Outreach Program (TOP) (youth.gov)](https://tppevidencereview.youth.gov/document.aspx?rid=3&sid=237&mid=1)

**Program Summary**

The Teen Outreach Program (TOP) promotes the positive development of adolescents through curriculum-guided, interactive group discussions; positive adult guidance and support; and community service learning. TOP is focused on key topics related to adolescent health and development, including building social, emotional, and life skills; developing a positive sense of self; and connecting with others. Specific curriculum lesson topics include health and wellness (including sexuality), emotion management, and self-understanding among many others. The development of supportive relationships with adult facilitators is a crucial part of the model, as are relationships with other peers in the program.

**Target Population**

The program is designed to meet the developmental needs of middle (6th-8th grades) and high school teens (9th-12th grades). The program has been evaluated with African American, Latino, and White middle and high school youth.

**Program Setting**

TOP is implemented in a variety of settings, including rural, urban, in school, after-school, through community organizations or in systems and institutional settings. The program has been evaluated in middle and high school settings, and in after-school and community-based settings.

**Program Objectives**

The goals of Wyman's TOP are:

1. Improve social, emotional, and life skills.
2. Support development of a positive sense of self.
3. Strengthen connections to others.
4. Improve academic outcomes and decrease risky behavior.

**Program Methods**

TOP is grounded in a Positive Youth Development theoretical framework, which focuses on enhancement and promotion of adolescent well-being. A program logic model is available on Wyman’s TOP website: <http://teenoutreachprogram.com/resources/> .

**Evidence-Informed Programs – Middle and/or High School**

***Rights, Respect, Responsibility (3Rs)***(augmented for additional contraception information and adult preparation subjects)

For more information on 3Rs: [Rights, Respect, Responsibility – Advocates for Youth (3rs.org)](https://3rs.org/)

**Rights, Respect, Responsibility** is a sex education curriculum that seeks to address both the functional knowledge related to sexuality and the specific skills necessary to adopt healthy behaviors. Rights, Respect, Responsibility reflects the tenets of social learning theory, social cognitive theory and the social ecological model of prevention. It follows the National Sexuality Education Standards for what students should learn and be able to do at each grade level, and it is inclusive of learners of all genders and sexual orientations. *Rights, Respect, Responsibility* is intended for use with students in Kindergarten through 12th grade. Its lessons are scaffolded, and age-appropriate, beginning with basic lessons about friendship and safety, and introducing more complex concepts as students age.

The core values of Rights. Respect. Responsibility. (3Rs):

**RIGHTS**: Youth have the inalienable right to honest sexual health information; confidential, consensual sexual health services; and equitable opportunities to reach their full potential.

**RESPECT**: Youth deserve respect. Valuing young people means authentically involving them in the design, implementation, and evaluation of programs and policies that affect their health and well-being.

**RESPONSIBILITY**: Society has the responsibility to provide young people with all of the tools they need to safeguard their sexual health, and young people have the responsibility to protect themselves

Lessons are 50 minutes in Grades 6-12. There are family homework activities for most lessons in Grades 6-9 to facilitate a way for students and their parents/care-givers to have important conversations together.

**Evidence-Informed Programs – High School**

***Get Real High School*** (augmented with additional lessons to address required adulthood preparation subjects)

For more information on Get Real High School: [WHY Get Real? | Get Real (getrealeducation.org)](https://www.getrealeducation.org/)

The high school curriculum consists of 11 sequential lessons taught in Grade 9 or 10. *Get Real*is designed to delay sex and increase correct and consistent use of protection methods when a person becomes sexually active. The *Get Real*curriculum is based on state and national frameworks that emphasize social and emotional learning skills such as self-awareness, self-management, social awareness, relationship skills, and responsible decision making.

*Get Real* is developmentally appropriate, inclusive of LGBTQ+ youth, trauma informed, and aligned to the National Health Education Standards using the CDC's Health Education Curriculum Analysis Tool.

Each *Get Real* lesson is designed to be taught in 45–55 minutes.

**Augmentation Descriptions**

**Adulthood Preparation Topics**

Lessons addressing each of the following adulthood preparations topics will be included with each of the approved evidence-based curricula.

***Healthy Relationships***

Relationships are interactions between people that are ongoing, voluntary, and mutually acknowledged. Healthy relationships are those relationships that are based on trust, honesty, and respect. Romantic relationships involve a unique dimension that is marked by affection, which is oftentimes physical and may or may not involve sex.

***Adolescent Development***

Adolescent development extends beyond the physiological changes that occur in adolescence to also encompass cognitive, emotional, social, sexual, identity formation, and spiritual change and growth. Adolescent development, the transition to adulthood, can occur between ages eight to twenty-four. Changing social structure and life demands have catalyzed a paradigm shift in what it takes for adolescents to become “successful” adults. In other words, there has been a significant move toward understanding successful development as a product of preparation and capacity building rather than as simply the absence or management of problems.

***Financial Literacy***

Financial education is the term used to capture efforts to improve financial literacy, and generally includes those programs that seek to improve knowledge, attitudes, and behavior related to personal finance. While experts do not agree on a uniform definition of the term financial literacy, in general, the term implies a level of basic knowledge or competence about financial concepts such as the ability to balance a checkbook, manage a credit card, prepare a budget, take out a loan, and buy insurance.

**What does it mean to implement a program with fidelity?**

Fidelity means that all components of the program must be implemented as written. When a full program model is being replicated with fidelity, adaptations to the program should generally be minimal, such as revising details in a role play, updating outdated statistics, adjusting reading and comprehension levels, making activities more interactive or tailoring learning activities and instructional methods to youth culture or development level. In some cases, more significant adaptations may be needed, such as adding components to address the additional adult preparation components of PREP or ensuring that both abstinence and contraception for the prevention of pregnancy and sexually transmitted infections are adequately addressed in a program. The Department also may choose to add on components related to pregnancy prevention and prevention of sexually transmitted infections. Any component that is added onto an evidence-based program must be well-integrated into the evidence-based program model and should not alter the core components of the evidence-based program model.