

## APPENDIX C



**THINK TRUE HEALTH NEEDS KNOWLEDGE**

**YEAR ONE EVALUATION REPORT  
SOUTHERN NEVADA HEALTH DISTRICT  
GRANT 1 TP1AH000121-01-00  
July 1, 2015 – June 30, 2016**

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**SOUTHERN NEVADA HEALTH DISTRICT  
GRANT 1 TP1AH000121-01-00**

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## **I. Executive Summary**

On July 1, 2015 the Southern Nevada Health District (SNHD) Teen Pregnancy Prevention (TPP) program was awarded funding from the Department of Health and Human Services (HHS) and the Office of Adolescent Health (OAH) to replicate multiple evidence-based teen pregnancy prevention programs to scale in communities with great need. The goal of the TPP program is to decrease the teen pregnancy rates by 15% among adolescents in identified high risk zip codes within the cities of Las Vegas and north Las Vegas. To accomplish this goal the TPP program partnered with Specialized Alternatives for Families and Youth (SAFY), Planned Parenthood of Southern Nevada and Southern Nevada Children First (SNCF) to implement evidence-based programs (EBP's) in collaboration with the Department of Juvenile Justice Services, the Department of Family Services and various community based organization through the Las Vegas Valley.

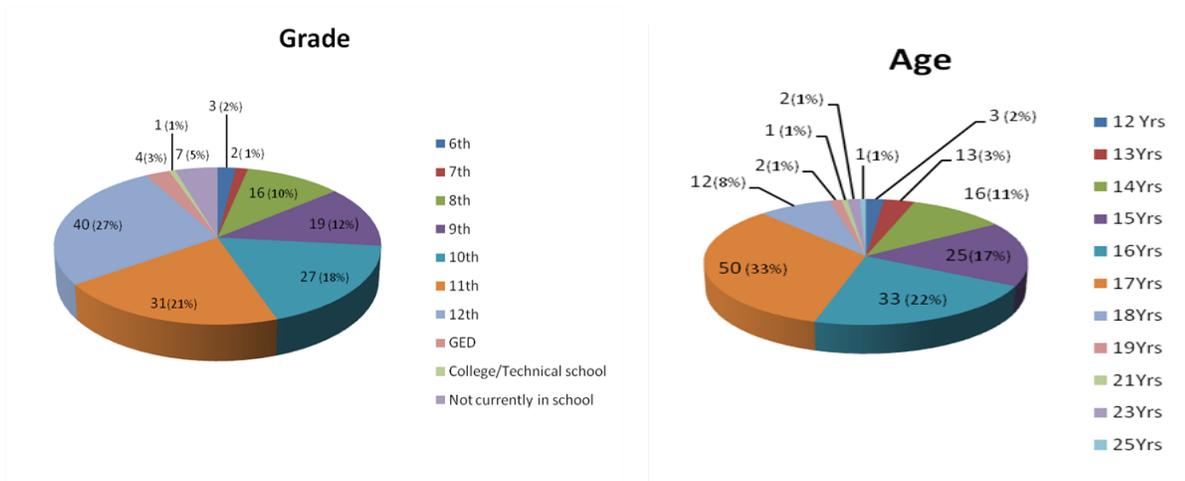
The EBP's selected for implementation during the 5 year grant cycle are Be Proud! Be Responsible! (BP!BR!), Families Talking Together (FTT) and Sexual Health and Adolescent Risk Prevention (SHARP). These programs have been reviewed and identified by HHS as having a positive impact preventing teen pregnancies, sexually transmitted infections, or sexual risk behaviors. Program implementation activities are guided by best practices such as "*Getting to Outcomes*" and collected data will be used to measure outcome results and conduct quality improvement activities. In addition, the Nevada Institute for Children's Research and Policy (NICRP) will conduct a more in-depth community impact evaluation.

Program activities during Year One or the planning, training and pilot phase consisted in formalizing partnerships, selecting the EBP's to be implemented, training facilitators and piloting BP!BR!. During Year One, 26 classes were implemented and a total of 210 youth were recruited for participation. Out of the 210 youth, 174 (82.86%) completed 75% or more of the implementation. The data analyzed and presented in the report was collected from implemented classes between the period of January 1, 2016 and June 30, 2016.

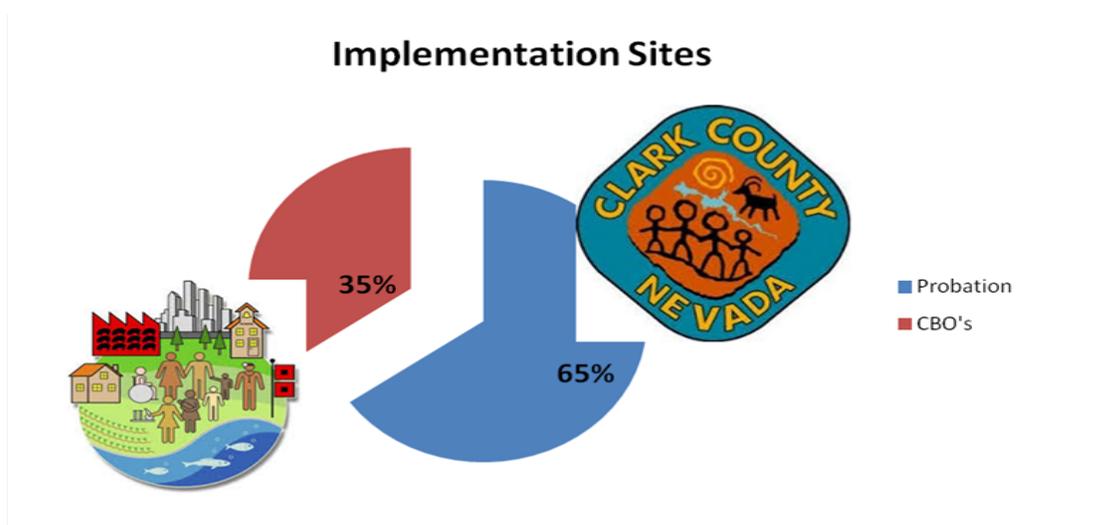
## II. Participant Demographics

Between January 1, 2016 and June 30, 2016, 210 youth were recruited, 174 youth completed 75% or more of the Be Proud! Be Responsible! curriculum and completed a PRE-Survey. Out of those 174 youth, 150 completed a PRE and POST Survey. The following is an overview of demographics for those participants.

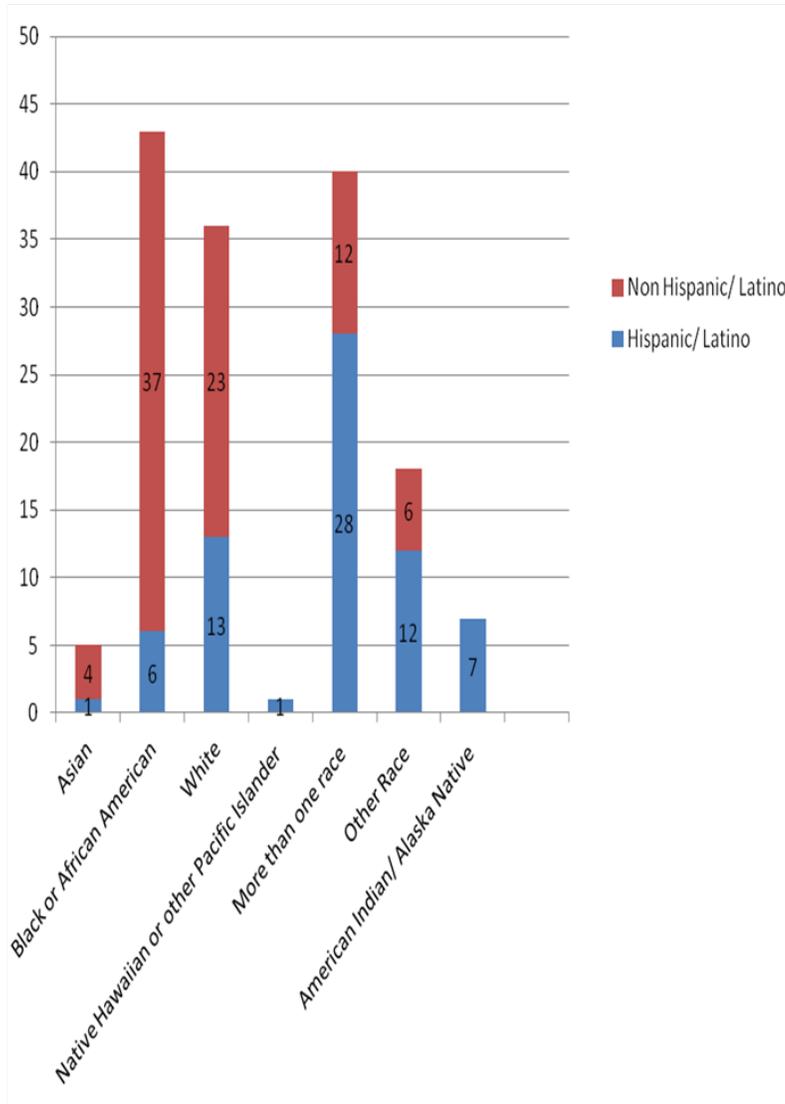
In Year One, 84 reported that they identified as male (56%), 64 reported as identifying as female (42.7%), one identified as transgender (0.7%) and one preferred not to answer (0.7%). Most participants reported being in 12<sup>th</sup> grade (26.7%) and being 17 years old (33.3%).



In Year One, the majority of participants completed the curriculum in Juvenile Justice setting of probation (65.2%) as compared to community based organizations (34.7%).



Race and ethnicity were asked together in the same question and are presented in the figure below. We noted that some participants may not have entirely understood the question when asked to report on race and ethnicity.



### III. Progress toward Outcome Goals

Progress toward the outcome goals for the THINK Project is address in the sections below. Within each section, the outcome goal is stated, the progress toward the goal is summarized, the methodology used to measure the goal is described and the results of the analyses are reported. If additional exclusion criteria were used to determine the outcome goal status, it is noted within the particular section.

**Outcome Goal 1:** 90% of youth participating in the program will demonstrate an increase in their knowledge about HIV transmission and prevention immediately after completing the curriculum (pre/post-test).

Program participants were surveyed prior to and immediately following program completion. At both points of measurement, participants were asked a series of ten true/false questions designed to measure knowledge about HIV/AIDS transmission and prevention. Of the participants that completed the program, 23 youth achieved a perfect score of 10/10 on the PRE Survey. Since these participants already demonstrated knowledge about HIV transmission and prevention that is provided in the curriculum, it is impossible for their score to increase. For this reason, these individual participants were excluded from the analysis. Of all participants that completed both the PRE and POST Surveys and provided valid answered to the entire series of questions:

- 82.68% (105) demonstrated an increase in knowledge (answered at least one additional question correctly after completing the curriculum)
- 14.96% (19) demonstrated no change in knowledge
- 3.15% (4) demonstrated a decrease in knowledge (answered at least one additional question incorrectly after completing the curriculum)

The THINK Project did not achieve the goal of having 90% of the participating youth demonstrate an increase in knowledge about HIV/AIDS transmission and prevention immediately following the curriculum. Prior to the curriculum, the average score on the 10 HIV/AIDS True/False statements was a 78.3% (7.8 correct out of 10 possible points) and the average score after the curriculum was 9.32% (9.3 correct out of 10 possible points). A paired samples t-test was performed on the total scores from the pre surveys and post surveys. The average score improved by 1.48 (SD=1.16), and the results from the paired samples t-test [ $t(126) = 14.38, p = .000$ ] show a statistically significant difference between the pre survey and post survey scores indicating that overall, participants scores significantly improved after participation in the curriculum.

**Outcome Goal 2:** 55% of sexually inexperienced youth participating in the program will demonstrate an intention to delay sexual activity.

This goal was assessed by comparing participant responses at pre-survey to the question, “Do you intend to have sexual intercourse in the next year, if you have the chance?” to post-survey responses. Response options ranged from 1 (Yes, definitely) to 4 (No, Definitely Not). Of the participants that completed the curriculum, provided valid responses to the question to both surveys, the intention to abstain among the participants is as follows (n=35):

- 54.3% (19) demonstrated an intention to delay sexual activity

The THINK Project is close to reaching its goal of 55% of sexually inexperienced youth demonstrating an intention to delay sexual activity.

**Outcome Goal 3 A:** 80% of sexually active youth participating in the program will demonstrate an increased intention to use condoms when engaging in sexual activities.

This goal was assessed by comparing participant responses at pre-survey to the question, “If you have sexual intercourse in the next year, do you intend to use (or have your partner use) a condom?” to post-survey responses of youth that answered “Yes” to having had sexual intercourse in their life. Of the youth that had valid PRE and POST Survey responses, 115 responded they have had sexual intercourse previously.

Response options ranged from 1 (Yes, definitely) to 4 (No, Definitely Not). Of the participants that completed the curriculum, 68 youth indicated “Yes, definitely” to the question “If you have sexual intercourse in the next year, do you intend to use (or have your partner use) a condom?” These participants were excluded because their intention to use condoms could not increase. Of those participants that provided valid responses to both PRE and POST surveys and did not respond “Yes, Definitely” on their PRE Survey:

- 53.19% (25) Increased intention to use birth control or condoms
- 40.43% (19) No change in intention to use birth control or condoms
- 6.38% (3) Decreased intention to use condoms

The THINK Project did not reach the goal of 80% of sexually active youth participating in the program demonstrate an increased intention to use condoms when engaging in sexual activities.

**Outcome Goal 3 B:** 80% of sexually active youth participating in the program will demonstrate an increased intention to use birth control when engaging in sexual activities.

This goal was assessed by comparing participant responses at pre-survey to the question, “If you have sexual intercourse in the next year, do you intend to use (or have your partner use) any of the following methods of birth control? Condoms, Birth Control Pills, The shot (Depo Provera),

The patch, The ring (NuvaRing), IUD (Mirena or Paraguard) or Implant (Nexplanon)” to post-survey responses of youth that answered “Yes” to having had sexual intercourse in their life. Response options ranged from 1 (Yes, definitely) to 4 (No, Definitely Not). Of the participants that indicated “Yes” to having had sexual intercourse in their life, 59 of them answered “Yes, definitely” to using birth control in the next year. For these youth, their intention to use birth control cannot increase and therefore have been excluded from analysis. Of the participants that completed the curriculum, provided valid responses to both PRE and POST surveys and did not respond “Yes, Definitely” on their PRE Survey:

- 53.57% (30) Increased intention to use birth control or condoms
- 41.07% (23) No change in intention to use birth control or condoms
- 5.36% (3) Decreased intention to use condoms

The THINK Project did not reach its goal of 80% of sexually active youth participating in the program will demonstrate an increased intention to use condoms when engaging in sexual activities.

**Outcome Goal 4:** 90% of youth will demonstrate increased knowledge in how to access sexual health information and “youth-friendly” services.

This goal was assessed by comparing participant responses at pre-survey to the question “Do you know where to find sexual health services and/or resources in your community?” to post-survey responses. Response options included “Yes” or “No.” Of the participants that completed the curriculum and provided valid responses to both the PRE and POST surveys and did not respond “Yes” in the PRE Survey,

- 58.82% (40) Increased their knowledge in how to access sexual health information

The THINK Project did not reach its goal of 90% of youth will demonstrate increased knowledge in how to access sexual health information and “youth-friendly” services.

**Outcome Goal 5:** At least 400 youth in the targeted communities will be referred to youth health services annually.

- 87 youth (21.75%) were referred to youth health services

The THINK Project did not reach its goal of 400 youth in targeted communities to be referred to youth health services during Year One.

#### **IV. Barriers Encountered**

The administration of surveys is the primary responsibility of the Southern Nevada Health District TPP team. A representative from the implementing organization serves as the alternate survey administrator when a TPP team member is not able to administer the survey. During this period surveys were administered in paper format.

During the pilot phase, data from 23 surveys was excluded from the analysis. Surveys were excluded for one of the following reasons: incomplete data or wrong data provided, participants did not complete one of the two required surveys, some participants refused to complete the surveys altogether and others were outside of the target age range for program participation. These instances of surveys with incomplete or wrong data could be attributed to survey administrator error, lack of understanding by the participant on how to complete the survey and/or apathy by the participant when completing the survey.