

PUTTING  
WHAT WORKS TO **work**  
A PROJECT OF THE NATIONAL CAMPAIGN TO PREVENT TEEN AND UNPLANNED PREGNANCY ★

# WHAT WORKS

# 2009

Curriculum-Based Programs  
That Prevent Teen Pregnancy

# WHAT WORKS



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**The National Campaign**  
to Prevent Teen and Unplanned Pregnancy

## In Brief: **What Programs Work to Prevent Teen Pregnancy?**

What programs delay sexual initiation, improve contraceptive use among sexually active teens, and/or prevent teen pregnancy? Over the years, The National Campaign has produced and disseminated a number of detailed reports and publications designed to answer this question. Here, in shorthand form, is an overview of what is known about carefully evaluated interventions that help delay sex, improve contraceptive use, and/or prevent teen pregnancy. We encourage those who want to learn more to review extensive materials on this topic at [www.thenationalcampaign.org/resources/effectiveprograms.aspx](http://www.thenationalcampaign.org/resources/effectiveprograms.aspx)



## WHAT WORKS

There is now persuasive and growing evidence that a number of programs can delay sexual activity, improve contraceptive use among sexually active teens, and/or prevent teen pregnancy. The strongest evidence stems from program evaluations that are experimental in nature—that is, participants are randomly assigned to treatment and control groups—and focus on changes in the *behavior* of program participants. Less powerful but still important evidence also comes from quasi-experimental designs. Effective programs can be divided into five broad categories:

- **Curriculum-based education** that usually encourages both abstinence and contraceptive use. These programs are generally offered as part of regular school classes or as part of after-school programs either on school grounds or in community centers.
- **Service learning** programs whose primary focus is keeping young people constructively engaged in their communities and schools. Participants in such programs typically take part in community service (such as tutoring, working in nursing homes, or helping fix up recreation areas) and reflect on their service through group discussions or writing about their experiences. Sometimes, a bit of education about ways to prevent teen pregnancy and related problems is included in the curriculum.
- **Youth development** programs that take a very broad approach. One that has been found to be effective with girls combines healthcare, academic assistance, sex education, participation in performing arts and individual sports, and employment assistance. All of these activities are designed to encourage participants to think and plan for their future.
- **Parent** programs that involve both parents and adolescents and generally seek to improve parent-child communication, particularly on sex and related topics. These programs are usually offered in a community-based setting, and are targeted to moms, dads, or both.
- **Community-wide** programs that tend to be much broader in scope and that encourage involvement from the entire community (not just teens and their parents). These programs might include public service announcements, educational activities for the community, or community-wide events such as health fairs.

Because of the significant variety among these interventions, communities now have more choices and more opportunities than ever to find programs that suit local values, opportunities, and budgets. Below is a chart of those programs that have evidence of success. Please note that *clinic-based* programs are not included in this publication. More information about clinic-based programs is available in The National Campaign brochure, *What Helps in Providing Contraceptive Services for Teens*.

## How do *you* define effective?

## CHARACTERISTICS OF EFFECTIVE PROGRAMS

Researchers have also identified a number of common characteristics of curriculum-based programs that are effective; many of these attributes probably apply to community-based programs, too. For example, effective programs:

- Convince teens that not having sex or that using contraception consistently and carefully is the *right* thing to do, as opposed to simply laying out the pros and cons of different sexual choices. That is, there is a clear message.
- Last a sufficient length of time (i.e. more than a few hours).
- Select leaders who believe in the program and provide these leaders with adequate training.
- Actively engage participants and have them personalize the information.
- Address peer pressure.
- Teach communication skills.
- Reflect the age, sexual experience, and culture of young people in the program.

For more information about the 17 characteristics of effective curriculum-based programs please refer to Chapter 7 in *Emerging Answers 2007* by Dr. Douglas Kirby available at: [www.thenationalcampaign.org/ea2007](http://www.thenationalcampaign.org/ea2007)

## HOW TO CHOOSE A PROGRAM

How can communities increase the chances that the programs they select—or design on their own—will actually change teen sexual behavior? Keeping your target group in mind, consider the following three strategies:

- **Best choice:** choose a program already shown through careful evaluation to be effective with similar groups of adolescents, and then put it into action as it was designed—no changes, no additions, or deletions.
- **Next best choice:** if using an existing successful program is not possible, communities should select or design programs that incorporate as many characteristics of effective programs as possible (see above).
- **Last best choice:** if options one and two are not possible, communities should (1) select the specific sexual behavior(s) they want to change; (2) study and understand the factors in the lives of young people most closely tied to the behavior to be changed; and (3) design activities that might affect some or all of these factors. For example, if the behavior to be changed is early sexual activity, learn about the factors that are closely tied to early sex (such as older partners) and then design interventions to change those factors. Visit [www.thenationalcampaign.org/resources/pdf/pubs/SexualRisk.pdf](http://www.thenationalcampaign.org/resources/pdf/pubs/SexualRisk.pdf) for more information on risk and protective factors.

## A NOTE OF CAUTION ABOUT EFFECTIVE PROGRAMS

Even those programs that have been shown to be effective in changing teen sexual behavior may have relatively modest results. Consequently, it is important to think carefully about what an effective program actually can accomplish. Some things to consider:

- How do *you* define effective? For example, is a program effective if its good results last only a relatively brief amount of time or only among boys? In other words, pay careful attention to the specific results of program evaluation and think carefully about what constitutes success. Is a 10 percent improvement enough? What if a program helps on one issue (i.e. increases contraceptive use) but makes another issue worse (i.e. lowers age of first sex)?
- Consider the magnitude of success. For example, if a program is successful at delaying first sex among participants, how *long* was the average delay? An effective program may only change things a bit.
- Keep in mind that there may very well be a number of creative programs that are effective in helping young people avoid risky sexual behavior that simply have not yet been evaluated.

## EVEN EFFECTIVE PROGRAMS CAN'T DO IT ALL.

Because teen pregnancy has many causes, and because even effective programs do not eliminate the problem, it is unreasonable to expect any single curriculum or community program to make a serious dent in the problem on its own. Making true and lasting progress in preventing teen pregnancy requires a combination of community programs and broader efforts to influence values and popular culture, to engage parents and schools, to change the economic incentives that teens face, and more. Another reason why it is unfair to place the entire responsibility for solving the problem of teen pregnancy on the back of community efforts is that many of these programs—even those deemed effective—often have only modest results, many are fragile and poorly-funded, and most of these programs serve only a fraction of all the kids in the area who are at risk.

## EFFECTIVE PROGRAM CHART

Over the years, The National Campaign has released a number of publications dedicated to answering the question: what programs have the best evidence of success in changing teen sexual behavior? This chart summarizes the best program reviews contained in these various publications and elsewhere. Those who wish to learn more about any of these programs are encouraged to review these publications in detail.

All of the programs described here have been carefully evaluated and have met several criteria. Specifically, each of these program evaluations must include at least the following characteristics:

- Been completed and published in 1980 or later;
- Been conducted in the United States or Canada;
- Been targeted at middle and/or high school aged teens;
- Included baseline and follow-up data (for at least 3 months);

- Measured impact on sexual behavior;
- Included at least 75 people in both the treatment and the control groups; and
- Used an experimental or quasi-experimental design (it is important to note that those programs that have been evaluated using an experimental design provide *stronger evidence* of effectiveness than those evaluated through a quasi-experimental design and are so-noted in the following chart).



## The National Campaign to Prevent Teen and Unplanned Pregnancy

### ABOUT THE NATIONAL CAMPAIGN TO PREVENT TEEN AND UNPLANNED PREGNANCY

The National Campaign is a nonprofit, nonpartisan organization supported largely by private donations. The National Campaign seeks to improve the lives and future prospects of children and families and, in particular, to help ensure that children are born into stable families who are committed to and ready for the demanding task of raising the next generation. Our specific strategy is to prevent teen pregnancy and unplanned pregnancy among single, young adults. We support a combination of responsible values and behavior by both men and women and responsible policies in both the public and private sectors.



## PUTTING WHAT WORKS TO **work**

A PROJECT OF THE NATIONAL CAMPAIGN TO PREVENT TEEN AND UNPLANNED PREGNANCY

### ABOUT THE PUTTING WHAT WORKS TO WORK PROJECT

Putting What Works to Work (PWWTW) is a project of The National Campaign funded, in part, by the Centers for Disease Control and Prevention. Through PWWTW, The National Campaign is translating research on teen pregnancy prevention and related issues into user friendly materials such as this *What Works* document for practitioners, policymakers, and advocates.

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# WHAT WORKS 2009



## AT A GLANCE

### LIST OF EFFECTIVE PROGRAMS

- 1 ★ All4You!
- 2 ★ Aban Aya Youth Project
- 3 ★ Becoming a Responsible Teen!
- 4 ★ Be Proud! Be Responsible!
- 5 ★ Children's Aid Society (CAS)-Carrera Program
- 6 ★ ¡Cúdate!
- 7 ★ Draw the Line/Respect the Line
- 8 ★ Focus on Kids
- 9 ★ Focus on Kids plus ImPACT
- 10 Get Real about AIDS (Quasi-Experimental)
- 11 Healthy Oakland Teens (Quasi-Experimental)
- 12 ★ HIV Prevention for Adolescents in Low-Income House Developments
- 13 ★ Keepin' It R.E.A.L.!
- 14 Learn and Serve America (Quasi-Experimental)
- 15 ★ Making a Difference! An Abstinence-Based Approach to HIV/STD and Teen Pregnancy Prevention
- 16 ★ Making Proud Choices! A Safer Sex Approach to HIV/STD and Teen Pregnancy Prevention
- 17 ★ McMaster Teen Program
- 18 Poder Latino: A Community AIDS Prevention Program for Inner City Latino Youth (Quasi-Experimental)
- 19 ★ Positive Prevention
- 20 ★ Postponing Sexual Involvement, Human Sexuality, and Health Screening Curriculum
- 21 Postponing Sexual Involvement (PSI) and Human Sexuality (Quasi-Experimental)
- 22 ★ Reach for Health Community Youth Service (RFH-CYS)
- 23 ★ REAL Men
- 24 Reasons of the Heart (Quasi-Experimental)
- 25 Reducing the Risk (Quasi-Experimental)
- 26 Rochester AIDS Prevention Project (Quasi-Experimental)
- 27 ★ Safer Choices
- 28 Seattle Social Development (Quasi-Experimental)
- 29 ★ SiHLE (HIV Prevention Intervention)
- 30 ★ Teen Outreach Program

★ As a general matter, programs that have been evaluated using an experimental design provide stronger evidence of effectiveness than those using a quasi-experimental design. Programs evaluated using an experimental design are noted with a star.

NAME OF PROGRAM	1 ★ All4You! (2006, dates in this cell note the year the evaluation was published)	2 ★ Aban Aya Youth Project (2004)	3 ★ Becoming a Responsible Teen (1995)	4 ★ Be Proud! Be Responsible! (1992)
DELAYED SEXUAL INITIATION	No	Not measured (NM)	Yes	NM
IMPROVED CONTRACEPTIVE USE	Yes (for 6 months only, not 12 or 18 months)	Yes (Boys only)	Yes	Yes
REDUCED TEEN PREGNANCY	NM	NM	NM	NM
STUDY SETTING AND SAMPLE	In-school program evaluated with teens in alternative schools; the intervention also included a service learning component; urban setting	In-school and after-school program for African-American 5th–8th grade students; urban setting	After-school program for African American teens aged 14–18; urban Southern setting	In-school or after-school program for African American boys grades 10–12; urban setting
SELECTED EFFECTS	6 months after the program ended: <ul style="list-style-type: none"> <li>Program participants were 2 times more likely than those in the control group to report using a condom at last sex.</li> </ul>	At the end of the program: <ul style="list-style-type: none"> <li>80% and 78% of boys in the intervention groups used condoms compared to 65% of boys in the control group.</li> </ul>	1 year after the intervention: <ul style="list-style-type: none"> <li>Girls in intervention were 44% more likely than girls in control group to use condoms.</li> <li>Virgins in the intervention group were 61% less likely to initiate sex than virgins in the control group.</li> </ul>	3 months after the intervention: <ul style="list-style-type: none"> <li>Program participants reported that they were significantly more likely to use a condom during intercourse compared to the control group participants.</li> </ul>
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FOR FURTHER INFORMATION	Emerging Answers 2007 www.thenationalcampaign.org/EA2007	It's a Guy Thing: Boys Young Men and Teen Pregnancy Prevention www.thenationalcampaign.org/resources  Emerging Answers 2007 www.thenationalcampaign.org/EA2007	A Good Time: After School Programs to Reduce Teen Pregnancy www.thenationalcampaign.org/resources  Not Yet: Programs to Delay First Sex Among Teens www.thenationalcampaign.org/resources  Emerging Answers 2007 www.thenationalcampaign.org/EA2007	A Good Time www.thenationalcampaign.org/resources  Emerging Answers 2007 www.thenationalcampaign.org/EA2007

NAME OF PROGRAM	5 ★ Children’s Aid Society (CAS)—Carrera Program (2002)	6 ★ ¡Cuidate! (2006)	7 ★ Draw the Line/Respect the Line (2004)
DELAYED SEXUAL INITIATION	Yes (Girls only)	No	Yes (Boys only)
IMPROVED CONTRACEPTIVE USE	Yes (Girls only)	Yes	No
REDUCED TEEN PREGNANCY	Yes (Girls only)	NM	NM
STUDY SETTING AND SAMPLE	Multi-year after-school youth development program for high-risk high school students aged 13–15; urban setting	After-school program for Latino teens in 8th–11th grade; urban setting	In-school program for youth 6th–8th grade; urban setting
SELECTED EFFECTS	<p>At the end of the program:</p> <ul style="list-style-type: none"> <li>Girls in intervention group were 18% less likely to have had sex than girls in the control group; were 55% less likely to become pregnant; and were 80% more likely to use dual methods of contraception at last sex.</li> <li>Males in the intervention group did not positively change sexual behavior.</li> </ul>	<p>At 3 months, 6 months, and 12 months after the program ended:</p> <ul style="list-style-type: none"> <li>Teens in the intervention group were significantly less likely than those in the control group to have had sex, and to have had multiple partners.</li> <li>Teens in the intervention group were significantly more likely than those in the control group to report consistent condom use.</li> <li>The intervention was particularly effective for Spanish speaking teens. Spanish speaking teens in the intervention group were 5 times more likely than Spanish speaking teens in the control group to report using a condom at last sex.</li> </ul>	<p>At 36-month follow-up:</p> <ul style="list-style-type: none"> <li>19% of boys in the program had sex compared to 27% in control.</li> </ul>
CONTACT INFORMATION	<p>Michael Carrera The Children’s Aid Society 105 East 22nd St New York, NY 10010 Phone: 212-876-9716 Web: <a href="http://www.stopteepregnancy.com">www.stopteepregnancy.com</a></p>	<p>Antonia M. Villarruel, Ph.D., R.N University of Michigan, School of Nursing 400 N Ingalls, Room 4320 Ann Arbor, MI 48109-0482 Email: <a href="mailto:avillarr@umich.edu">avillarr@umich.edu</a></p>	<p>ETR Associates 4 Carbonero Way Scotts Valley, CA 95066 Phone: 800-321-4407 Fax: 800-435-8433 Web: <a href="http://www.etr.org">www.etr.org</a>  PASHA Archive: <a href="http://www.socio.com/srch/summary/pasha/full/passt20.htm">www.socio.com/srch/summary/pasha/full/passt20.htm</a></p>
FOR FURTHER INFORMATION	<p>A Good Time <a href="http://www.thenationalcampaign.org/resources">www.thenationalcampaign.org/resources</a>  Not Yet <a href="http://www.thenationalcampaign.org/resources">www.thenationalcampaign.org/resources</a>  Emerging Answers 2007 <a href="http://www.thenationalcampaign.org/EA2007">www.thenationalcampaign.org/EA2007</a></p>	<p>Emerging Answers 2007 <a href="http://www.thenationalcampaign.org/EA2007">www.thenationalcampaign.org/EA2007</a>  Science Says #32: Effective and Promising Teen Pregnancy Prevention Programs for Latino Youth <a href="http://www.thenationalcampaign.org/resources">www.thenationalcampaign.org/resources</a></p>	<p>No Time to Waste: Programs to Reduce Teen Pregnancy Among Middle School Youth <a href="http://www.thenationalcampaign.org/resources">www.thenationalcampaign.org/resources</a>  Not Yet <a href="http://www.thenationalcampaign.org/resources">www.thenationalcampaign.org/resources</a>  Emerging Answers 2007 <a href="http://www.thenationalcampaign.org/EA2007">www.thenationalcampaign.org/EA2007</a></p>

NAME OF PROGRAM	8 ★	9 ★	10
	Focus on Kids (1996)	Focus on Kids plus ImPACT (2004)	Get Real about AIDS Quasi-Experimental (1994)
DELAYED SEXUAL INITIATION	NM	NM	No
IMPROVED CONTRACEPTIVE USE	Yes	Yes (at 6 months only, not 12 or 24 months)	Yes
REDUCED TEEN PREGNANCY	NM	Yes (at 24 months for ImPACT group only)	NM
STUDY SETTING AND SAMPLE	After-school program for African-American youth aged 9–15; urban setting	After-school program for African-American youth aged 13–16 years and their parents; urban setting	In-school program for high school students; urban setting
SELECTED EFFECTS	<p>6 months after the intervention:</p> <ul style="list-style-type: none"> <li>Youth in intervention were 39% more likely to have used a condom at last sex than control group.</li> </ul>	<p>6 months after the intervention:</p> <ul style="list-style-type: none"> <li>Participants in both the parent program and in the parent program with booster sessions were more likely than those in the group without the additional parent intervention to report using a condom.</li> </ul> <p>24 months after the intervention:</p> <ul style="list-style-type: none"> <li>Participants in the parent program were less likely than those in the group without the additional parent intervention to report getting pregnant or causing a pregnancy (those in the parent plus booster session group showed no difference).</li> </ul>	<p>6 months after the intervention:</p> <ul style="list-style-type: none"> <li>Teens in the program reported more condom use in the past 2 months compared to teens in the comparison group.</li> </ul>
CONTACT INFORMATION	<p>ETR Associates 4 Carbonero Way Scotts Valley, CA 95066 Phone: 800-321-4407 Fax: 800-435-8433 Web: www.etr.org</p> <p>PASHA Archive: www.socio.com/srch/summary/pasha/passt16.htm</p>	<p>Bonita F. Stanton Department of Pediatrics, Wayne State University, Children’s Hospital of Michigan, Detroit, MI 48202 bstanton@med.wayne.edu</p> <p>For details on intervention materials: Winifred King, 404-639-0892, email: WKing@cdc.gov</p> <p>ETR Associates 4 Carbonero Way Scotts Valley, CA 95066 Phone: 800-321-4407 Fax: 800-435-8433 Web: www.etr.org</p>	<p>Deborah S. Main Department of Family Medicine, University of Colorado Health Sciences Center, Denver, CO 80220 debbi.Main@uchsc.edu</p> <p>PASHA Archive: www.socio.com/srch/summary/pasha/full/passto7.htm</p>
FOR FURTHER INFORMATION	<p>A Good Time www.thenationalcampaign.org/resources</p> <p>No Time to Waste www.thenationalcampaign.org/resources</p> <p>Emerging Answers 2007 www.thenationalcampaign.org/EA2007</p>	<p>Emerging Answers 2007 www.thenationalcampaign.org/EA2007</p>	<p>Emerging Answers 2007 www.thenationalcampaign.org/EA2007</p>

	11	12 ★	13 ★	14	15 ★
<b>NAME OF PROGRAM</b>	Healthy Oakland Teens Quasi-Experimental (1996)	HIV Prevention for Adolescents in Low-Income Housing Developments (2005)	Keepin' It R.E.A.L! (2006)	Learn and Serve America Quasi-Experimental (1998)	Making a Difference! An Abstinence-Based Approach to HIV/STD and Teen Pregnancy Prevention (1998)
<b>DELAYED SEXUAL INITIATION</b>	Yes	Yes	No	NM	Yes (at 3 months but not at 6 or 12 months)
<b>IMPROVED CONTRACEPTIVE USE</b>	NM	Yes	Yes	NM	Yes (at 12 months but not at 3 months or 6 months)
<b>REDUCED TEEN PREGNANCY</b>	NM	NM	NM	Yes (short-term among middle school youth)	NM
<b>STUDY SETTING AND SAMPLE</b>	In-school peer education program for 7th grade; urban setting	Community-wide program for teens aged 12–17; urban setting	After-school parent program for youth aged 11–14 and their mothers; urban setting	In-school service learning program for middle and high school students; multi-site, urban, suburban, and rural	After-school program for African American youth grades 6 and 7; urban setting
<b>SELECTED EFFECTS</b>	8–11 months after the intervention:  •5% of program participants who are virgins had initiated sex in the year following the program compared to 18% of comparison group.	18 months after baseline:  •Teens in the community level intervention were more likely than those in the control group to remain abstinent (85% vs. 76%), and were more likely than those in the control group to have used a condom at last sex (77% vs. 62%).	Over 24 months:  •Teens in the life skills intervention group were significantly more likely than teens in the social cognitive intervention and the control group to report condom use in the past 30 days, in the past 3 months, and in the past year.	Immediately after program ended:  •Program participants were half as likely to be involved in a pregnancy than comparison group.  •No difference in pregnancy rates after 1 year.	3 months after the intervention:  •Program participants were less likely to have had sex compared to control group participants (12.5% vs. 21.5%).  12 months after the intervention:  •Program participants had a higher frequency of condom use than control group (3.9 vs. 3.2) on a scale of 1 to 5 (never to always).
<b>CONTACT INFORMATION</b>	Maria L. Ekstrand, Ph.D. Project Director Center for AIDS Prevention Studies UCSF, 4 New Montgomery St., Suite 600 San Francisco, CA 94105 Phone: 415-597-9160 Email: mekstrand@psg.ecsf.edu	Kathleen Sikkema Duke University DUMC 3322 307 Trent Drive Durham, NC 27710 kathleen.sikkema@duke.edu	Colleen Dilorio, Ph.D., R.N., FAAN Department of Behavioral Sciences and Health Education- Rollins School of Public Health, Emory University 1520 Clifton Road, NE, Atlanta, GA 30032 Email: cdilori@sph.emory.edu	Amy Cohen Learn & Serve Director Corporation for National and Community Service 1201 New York Ave, NW Washington, DC Phone: 202-606-5000 ext 484 Web: www.cns.org or www.learnandserve.org	Select Media Film Library, 22-D Hollywood Ave Hohokus, NJ 07423 Phone: 800-343-5540 Fax: 201-652-1973 Web: www.selectmedia.org
<b>FOR FURTHER INFORMATION</b>	Not Yet www.thenationalcampaign.org/resources  Emerging Answers 2007 www.thenationalcampaign.org/EA2007  Center for AIDS Prevention Studies: www.caps.ucsf.edu/projects/HOT/	Emerging Answers 2007 www.thenationalcampaign.org/EA2007	Emerging Answers 2007 www.thenationalcampaign.org/EA2007	A Good Time www.thenationalcampaign.org/resources  Emerging Answers 2007 www.thenationalcampaign.org/EA2007	A Good Time www.thenationalcampaign.org/resources  Not Yet www.thenationalcampaign.org/resources  No Time to Waste www.thenationalcampaign.org/resources  Emerging Answers 2007 www.thenationalcampaign.org/EA2007

	16 ★	17 ★	18	19 ★
<b>NAME OF PROGRAM</b>	Making Proud Choices! A Safer Sex Approach to HIV/STD and Teen Pregnancy Prevention (1998)	McMaster Teen Program (1997)	Poder Latino: A Community AIDS Prevention Program for Inner City Latino Youth Quasi-Experimental (1994)	Positive Prevention (2006)
<b>DELAYED SEXUAL INITIATION</b>	No	No	Yes (Boys only)	Yes (among sexually inexperienced only)
<b>IMPROVED CONTRACEPTIVE USE</b>	Yes	Yes (Boys only)	NM	No
<b>REDUCED TEEN PREGNANCY</b>	NM	No	NM	NM
<b>STUDY SETTING AND SAMPLE</b>	After-school program for African-American youth grades 6 and 7; urban setting	In-school program for 7th and 8th grade	In-school, after-school and community wide program with Latino youth aged 14–20; urban setting	In-school program with 9th grade students; suburban; 60% of participants were Latino
<b>SELECTED EFFECTS</b>	12 months after the intervention: <ul style="list-style-type: none"> <li>•Among sexually active youth, those in the program reported a lower frequency of unprotected sex than those in the control group (0.04 days vs. 1.9 days).</li> </ul>	At 1 year follow-up: <ul style="list-style-type: none"> <li>•Boys in the intervention group were more likely to report that they always used contraception compared to control group.</li> <li>•There was no difference between intervention and control group by 4 year follow-up.</li> </ul>	At the 18 month follow-up: <ul style="list-style-type: none"> <li>•Male program participants were 92% less likely to initiate sex than comparison group males.</li> </ul>	At the 6-month follow-up among students who were sexually inexperienced at pre-test: <ul style="list-style-type: none"> <li>•9% of students in the intervention group reported initiating sexual intercourse compared to 24% of students in the control group.</li> </ul>
<b>CONTACT INFORMATION</b>	Select Media Film Library, 22-D Hollywood Ave Hohokus, NJ 07423 Phone: 800-343-5540 Fax: 201-652-1973 Web: www.selectmedia.org	Alba Mitchell-DiCenso Professor School of Nursing McMaster University 1200 Main St West Hamilton, ON L8N 3Z5 Canada Phone: 905-525-9140 ext. 22405 Email: dicensoa@mcmaster.ca	Deborah Sellers Center for Applied Ethics and Professional Practice, Education Development Center, Inc. 55 Chapel Street Newton, MA 02458-1060 dsellers@edc.org  PASHA Archive: www.socio.com/srch/summary/pasha/full/passt11.htm	Robert LaChausse Department of Health and Human Ecology California State University San Bernardino, CA rlachaus@csusb.edu
<b>FOR FURTHER INFORMATION</b>	A Good Time www.thenationalcampaign.org/resources  No Time to Waste www.thenationalcampaign.org/resources  Emerging Answers 2007 www.thenationalcampaign.org/EA2007	Not Yet www.thenationalcampaign.org/resources  No Time to Waste www.thenationalcampaign.org/resources  Emerging Answers 2007 www.thenationalcampaign.org/EA2007	Not Yet www.thenationalcampaign.org/resources  Emerging Answers 2007 www.thenationalcampaign.org/EA2007	Emerging Answers 2007 www.thenationalcampaign.org/EA2007

	20 ★	21	22 ★	23 ★
<b>NAME OF PROGRAM</b>	Postponing Sexual Involvement, Human Sexuality, and Health Screening Curriculum (2000)	Postponing Sexual Involvement (PSI) Quasi-experimental (1990)	Reach for Health Community Youth Service (RFH-CYS) (2002)	REAL Men (2007)
<b>DELAYED SEXUAL INITIATION</b>	Yes (Girls only)	Yes	Yes	Yes (at 6 month follow-up; did not delay at 3 month or 12 month)
<b>IMPROVED CONTRACEPTIVE USE</b>	Yes (Girls only)	Yes (among those who were virgins at the start of the program)	Not reported in evaluation	Yes (among sexually experienced teens)
<b>REDUCED TEEN PREGNANCY</b>	NM	NM	NM	NM
<b>STUDY SETTING AND SAMPLE</b>	In-school programs for 7th grade; urban setting	In-school program, 8th grade; urban setting	In-school service learning program for middle school students; urban setting	After-school parent program with adolescent boys aged 11 to 14 and their fathers (or a father figure); urban setting
<b>SELECTED EFFECTS</b>	<p>Several months after the intervention:</p> <ul style="list-style-type: none"> <li>•Girls in the program were twice as likely as control group participants to delay sex.</li> <li>•Girls in the program were 3 to 7 times more likely to have used contraception at last sex compared to control group.</li> </ul>	<p>1 year after the program:</p> <ul style="list-style-type: none"> <li>•Among girls, 17% of program participants had initiated sex compared to 27% of comparison group.</li> <li>•Among boys, 39% of program participants had initiated sex compared to 61% of comparison group.</li> </ul>	<p>2 years after intervention:</p> <ul style="list-style-type: none"> <li>•50% of boys had initiated sex by the end compared to 80% control group.</li> <li>•40% of girls had initiated sex by the end compared to 65% of control group.</li> </ul>	<p>At 12 month follow-up:</p> <ul style="list-style-type: none"> <li>•31% of boys in the intervention group reported ever having sex without a condom compared to 60% in the control group.</li> <li>•Fathers in the control group were more likely to report talking to their sons about sex-related topics compared to fathers in the control group.</li> </ul>
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<b>FOR FURTHER INFORMATION</b>	<p>No Time to Waste www.thenationalcampaign.org/resources</p> <p>Not Yet www.thenationalcampaign.org/resources</p> <p>Emerging Answers 2007 www.thenationalcampaign.org/EA2007</p>	<p>Not Yet www.thenationalcampaign.org/resources</p> <p>Emerging Answers 2007 www.thenationalcampaign.org/EA2007</p>	<p>No Time to Waste www.thenationalcampaign.org/resources</p> <p>Not Yet www.thenationalcampaign.org/resources</p> <p>Emerging Answers 2007 www.thenationalcampaign.org/EA2007</p>	<p>Emerging Answers 2007 www.thenationalcampaign.org/EA2007</p>

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<b>NAME OF PROGRAM</b>	Reasons of the Heart Quasi-Experimental (2008)	Reducing the Risk, Quasi-Experimental (1998)	Rochester AIDS Prevention Project Quasi-Experimental (2002)	Safer Choices (2004)	Seattle Social Development Quasi-Experimental (2002)
<b>DELAYED SEXUAL INITIATION</b>	Yes	Yes	Yes (middle school boys only)	Yes (Latino program participants only)	Yes
<b>IMPROVED CONTRACEPTIVE USE</b>	NM	Yes (among those who were sexually inexperienced at pretest)	NM	Yes	Yes
<b>REDUCED TEEN PREGNANCY</b>	NM	No	NM	NM	Yes
<b>STUDY SETTING AND SAMPLE</b>	In-school program for 7th grade students	In-school program with high school students	In-school program with middle school and high school youth; urban setting	School-based program for 9th and 10th graders; urban and suburban setting	In-school program for grades 1–6; urban setting
<b>SELECTED EFFECTS</b>	At 12 month follow-up: •9% of students in the program had ever had sex compared to 16% of students in the comparison group.	At 18 month follow-up: •Program participants were 35% less likely to initiate sex compared to comparison group.	6–12 months post-intervention: •Boys in the peer taught and school teacher groups were 60% less likely to initiate sex than the comparison group participants.	At 31 months follow-up: •Sexually active program participants were 1.5 times more likely to use a condom and 1.5 times more likely to report using another method of birth control than control participants.	Follow-up was conducted at age 18 and age 21: •Program participants reported later age of first sex (0.5 years older). •At age 18: program participants were 35% less likely to have been involved in a pregnancy. •At age 21: 38% of girls in the program reported having been pregnant compared to 56% of girls in the comparison group.
<b>CONTACT INFORMATION</b>	Dr. Stan Weed Director Irene H. Ericksen Research Analyst Institute for Research and Evaluation, 6068 S Jordan Canal Road, Salt Lake City, UT 84118. E-mail: weedstan@aol.com	ETR Associates 4 Carbonero Way Scotts Valley, CA 95066 Phone: 800-321-4407 Fax: 800-435-8433 Web: www.etr.org  PASHA Archive: www.socio.com/srch/summary/pasha/full/paspp04.htm	Marilyn J. Aten, Ph.D. Associate Professor, School of Nursing University of Rochester 260 Crittenden Blvs. Rochester, NY 14642 Email: marilyn_aten@urmc.rochester.edu	Karin Coyle Director Research ETR Associates PO Box 1830 Santa Cruz, CA 95061 Phone: 831-438-3577 Email: KarinC@etr.org  PASHA Archive: www.socio.com/srch/summary/pasha/full/passt21.htm	J. David Hawkins, Ph.D. Professor, Director, Social Development Research Group University of Washington 9725 Third Ave, NE, Suite 401 Seattle, WA 98115 Phone: 206-221-7780 Email: jdh@u.washington.edu
<b>FOR FURTHER INFORMATION</b>	Weed, SE, Erickson, IH, Lewis, A, Grant, GE, and Wibberly, KH (2008). An Abstinence Program's Impact on Cognitive Mediators and Sexual Initiation. <i>American Journal of Health Behavior</i> , 32(1):60-73.	Not Yet www.thenationalcampaign.org/resources  Emerging Answers 2007 www.thenationalcampaign.org/EA2007	Not Yet www.thenationalcampaign.org/resources  Emerging Answers 2007 www.thenationalcampaign.org/EA2007	Not Yet www.thenationalcampaign.org/resources  Emerging Answers 2007 www.thenationalcampaign.org/EA2007	Not Yet www.thenationalcampaign.org/resources  Emerging Answers 2007 www.thenationalcampaign.org/EA2007

	29 ★	25 ★
<b>NAME OF PROGRAM</b>	SiHLE (HIV Prevention Intervention) (2004)	Teen Outreach Program (1997)
<b>DELAYED SEXUAL INITIATION</b>	NM	NM
<b>IMPROVED CONTRACEPTIVE USE</b>	Yes	NM
<b>REDUCED TEEN PREGNANCY</b>	Yes (at 6 months, not at 12 months)	Yes
<b>STUDY SETTING AND SAMPLE</b>	After-school program for girls in high school; urban setting	In-school service learning intervention, 9th–12th grade; multi-site
<b>SELECTED EFFECTS</b>	<p>Follow-up was conducted at 6 months and 12 months.</p> <p>At 6 months:</p> <ul style="list-style-type: none"> <li>•Program participants were less likely to report a pregnancy (difference not significant at 12 months).</li> </ul> <p>At both 6 and 12 months:</p> <ul style="list-style-type: none"> <li>•Program participants more likely to report consistent condom use and are less likely to report unprotected sex.</li> </ul>	<p>At program completion:</p> <ul style="list-style-type: none"> <li>•Intervention group participants had half the percentage of pregnancies as the control group (9.8 vs. 4.2).</li> </ul>
<b>CONTACT INFORMATION</b>	<p>Ralph DiClemente Rollins School of Public Health, Department of Behavioral Science and Health Education, 1518 Clifton Rd NE, Room 554, Atlanta, GA 30322 rdiclem@sph.emory.edu</p> <p>PASHA Archive: <a href="http://www.socio.com/srch/summary/pasha/full/passt23.htm">www.socio.com/srch/summary/pasha/full/passt23.htm</a></p>	<p>Wyman Center, Inc 600 Kiwanis Dr Eureka, MO 63025 Phone: 636-938-5245 Website: <a href="http://www.wymancenter.org">www.wymancenter.org</a></p>
<b>FOR FURTHER INFORMATION</b>	<p>Emerging Answers 2007 <a href="http://www.thenationalcampaign.org/EA2007">www.thenationalcampaign.org/EA2007</a></p>	<p>A Good Time <a href="http://www.thenationalcampaign.org/resources">www.thenationalcampaign.org/resources</a></p> <p>Emerging Answers 2007 <a href="http://www.thenationalcampaign.org/EA2007">www.thenationalcampaign.org/EA2007</a></p>