

# Year One Overview of Promoting Alternatives for Teen Health through Artes Teatro, A Peer-Led Pregnancy Prevention Pilot Program

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## Introduction

PATH-AT, is a youth-led abstinence-only after-school intervention using Peer Educators and the arts to educate 7<sup>th</sup> and 8<sup>th</sup> grade (12 -15 yrs) students and their families in low income communities in the San Fernando Valley about the benefits of abstaining from premarital sex. PATH-AT uses this strategy by implementing activities that 1) provide 12 weeks of abstinence education (1.25 hrs/wk), 2) are culturally and age appropriate, 3) focus on developmental assets, 4) provide peer support, and 5) use multiple pathways to engage and empower youth in the community. PATH-AT involves the entire family by 1) offering a five week (2-hrs/wk) Parent Workshop series; 2) hosting three 1.5 hour Family “Noche de Teatro” and two 2.5 hour YMCA Healthy Family Nights, and 3) by conducting a 3 hour Graduation/ Conference.

Measured through pre and post test, intervention students will show an increase in 1) the strength of the belief that having sex as a teenager and/or before marriage can make it more difficult to: a) stay in school in the future, b) grow and develop emotionally and c) have a good marriage and a good family life in the future; 2) the rate of report by middle school students that abstinence is the only certain way to avoid pregnancy, STDs, and other related health problems; 3) perceptions that behavioral control and expectations for an internal locus of control; 4) intent to remain abstinent or return to abstinence until marriage; and 5) parent-child communication regarding sexuality and relationship issues.

## Method

### *Outcome*

An experimental, two-group repeated-measures evaluation design has been implemented to measure program outcomes. Three pairs of middle schools were matched on the basis of demographic factors and randomly assigned to the intervention or to a control condition. The revised OAPP core questionnaire was administered to both intervention and control participants before exposure to the intervention curriculum (pre-test), and at the end of the curriculum cycle (post-test) by evaluation staff. Only students who provided assent, and parental consent participated in the data collection process (completed questionnaires). An abbreviated version of the revised core questionnaire will be administered at six, 12 and 24 months following participation in the program to ascertain long term/ delayed effects.

Recruitment targets specify 150 students in each condition for two semesters per year, for a total of 600 research subjects (2 x 150 x 2). The preliminary results presented here utilize data provided by students who participated in *both* the pre- and post-test during the pilot PATH-AT project conducted in the spring semester of Year One. Forty-eight youth in the intervention schools and 34 in the control schools completed *both* pre and post test questionnaires. For each outcome objective detailed on page one, it is hypothesized that greater change in regards to abstinence and risky behaviors will occur in the intervention than in the control condition.

A variety of inferential statistics (one-way analysis of variance, cross-tabulation analysis and *t*-tests) will be utilized to confirm the comparability between students assigned to the intervention and control conditions. In the event that youth in the intervention and control are not comparable on some key factor thought to be related to an outcome variable, that factor will be utilized as a covariate in all subsequent analyses. To test the study hypotheses, change scores will be computed for the primary outcome variables by regressing post-test on pre-test scores to produce residuals. The change scores

of the youth assigned to the intervention condition will be compared to change scores for subjects in the control condition, potentially controlling for the effects of covariates.

### *Process*

IRB approval was obtained for program and evaluation activities. A variety of process evaluation methods including key informant interviews, focused group discussions, self-administered questionnaires, analysis of journal entries provided by peer educators and professional PATH-AT staff; site observations, and analysis of intervention curriculum fidelity assessment reports were implemented during Year One.

## **Results**

Outcome evaluation results are forthcoming. Extensive process evaluation was conducted throughout the pilot phase of the program. A midpoint assessment of program implementation was conducted. A total of ninety-three student participants completed a self administered paper and pencil questionnaire (intervention  $n=68$ , control  $n= 25$ ). Both quantitative and qualitative data was collected to assess youth participants' perception of the theater aspect of the program. Ninety-five percent ( $n= 88$ ) of respondents indicated a strong support for the arts/theater component. The top three responses students liked the most about the intervention were plays/actors, the information provided, and the manner the program is presented. One-way analysis of variance (ANOVA) indicates significant differences between control and intervention conditions for a) how to make a good decision, b) how to set goals for their future, c) how to resist peer pressure. This is consistent with the intervention curriculum's focus on the topics.

The parent component worked with Parent Center Directors to encourage parent participation in a series of workshops and extra curricular activities. The result was 14 intervention parents participated in workshops, 44 attended the YMCA Healthy Family Night and 50 participated in workshops at the PATH-AT graduation conference. Respondents from the parent workshops indicated that they would recommend the workshop to other parents.

## **Discussion**

PATH-AT's limited sample size during the pilot project was due to delays in the program start date caused by the lengthy IRB approval process, school holidays, and conflicts with school testing schedules. These delays resulted in 154 out of 257 students completing the baseline core questionnaire and 53% ( $n=83$ ) of them completing the post-test. One limitation of the forthcoming outcome evaluation results is the small sample size; thus reducing statistical power and diminishing the possibility of detecting program effects, as well as constraining subgroup analyses. Challenges presented in the parent component resulted in improved recruitment strategies for year two, such as conducting YMCA night prior to the Parents Workshops for better promotion and incorporating Parent Workshops into the YMCA Healthy Family Night's agenda.

## **Implications**

Process evaluation results indicate that the overall program design is effective. However, improvements were implemented for Year 2. Ice breakers and giveaways were incorporated during recruitment presentations. Staff participated in back to school nights. Changes to the control curriculum were made to incorporate more dance and sport activities. "Good Time" tickets incentives were implemented during parent and youth program components.

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