

Oregon Youth Development Project – New Project

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Introduction

The Oregon Youth Development Project is a new, innovative project serving youth in the greater Portland metropolitan area with an abstinence education prevention demonstration project. Northwest Family Services (NWFS) is a non-profit, non-sectarian organization in Portland, Oregon. The demonstration project will study and compare the effects of (a) a school-based program for youth combined with a related program of intensive parental involvement and (b) the same school-based program for youth without the intensive parental involvement program. Twenty schools will participate with ten receiving the enrichment parent component. Six out of the twenty schools that will be serviced have a minority enrollment that exceeds fifty percent. The program for youth will involve 15-20 hours of intervention, reaching approximately 4,000 eighth graders. The curriculum, which was developed by NWFS, includes the FACTS/DATOS abstinence curricula covering all the A-H criteria. The lessons infused within the curricula will include healthy boundaries, media influences, consequences of early sexual initiation, premarital sex, benefits of abstinence, and a creative component allowing participants to highlight the positive elements of abstinence. Youth leaders comprised of high school and college students serve as volunteers by assisting as actors in socio dramas that will feature teen issues and positive ways of managing peer pressure. The enrichment component for parents will be comprised of the following components: personal contact, take home assignments, family engagement events, workshops, webinars, e-newsletters, and websites. Over the course of the project, it is expected that 2,000 parents will participate.

Methods

An experimental design with randomized assignment has been selected as the method for the demonstrating and comparing the effectiveness of the interventions, which is the purpose of the evaluation. Twenty schools are being compared for the assessment of possible group differences based on random assignment at the school level. The reference population for the enhanced intervention demonstration project is comprised of students and parents from urban, suburban, and rural geographical locations throughout Oregon. Schools from each county are selected and matched based on social demographic factors. The outcomes will be measured by the Adolescent and Family Life (AFL) prevention core instruments (pre-, post-, one year, and two year follow ups); the Youth Development Program (YDP) Teen Survey (McBride, Noyes, & Malloy, 2003; McBride, Voss, Villanueva, Waldron, & Smith, 2006); and the Parent-Adolescent Form Survey (Barnes & Olson, 1985). Results for the Intervention Group (IG) will reflect effects of the core intervention that all adolescents will receive and results for the Enrichment Group (EG) will reflect effects of the core intervention plus the effects of the additional parental component presented to one-half of the randomly selected schools. The analysis of responses to these measures will be analyzed with multivariate statistical methods such as hierarchical linear analysis and repeated measures anovas, to understand growth over time for individuals and the clustering that occurs with students nested in schools.

Objective 1. By the end of the first year, at least 80% of the children in the EG will report an increase in the involvement of their parents in the children's lives, as measured by AFL prevention core instruments. In addition, EG parents will maintain a relatively high level of involvement in their children's lives for one and two years after the intervention ends, as indicated at the first and second year follow-ups where the involvement of parents will be greater for children in the EG than in the IG.

Objective 2. By the end of the first year, at least 75% of the youth who participated in program interventions, for both the EG and the IG, will report an increased understanding of the positive health and emotional benefits of abstaining from premarital sexual activity, as measured by AFL core instruments. In addition, this understanding will be stronger for the EG than for the CC at one and two year intervals after the intervention ends.

Objective 3. After the interventions, participating youth both groups will strengthen their intention to be sexual abstinent as premarital teens and the rates of sexual initiation will over the following two years will be lower for EG youth whose parents respond to the enhanced intervention than for (a) IG youth and (b) EG youth whose parents do not respond to any of the opportunities to actively be involved in the parent support and education opportunities. First, by the end of the first year, there will be an increase of at least 20 percentage points in the percentage of participating youth who have a stronger intention to be sexually abstinent for youth in both the EG and the IG, as measured by a higher score on the post-test than on the pre-test on the “Sexual Behavior Intent” Scale from the YDP Teen Survey Furthermore, the increase in the percentage of youth reporting a stronger intention to abstain will be greater in EG group than in the CG. Second, the average score on the importance of remaining abstinent until marriage scale on the AFL Core Questionnaire will be higher after the intervention than before for EG than for the IG. Third, at post-test and first and second year follow-ups, the percentage of virgin youth who have (a) initiated sex since the pre-test and who (b) have been sexually active in the last 30 days, will be less for the EG than for the IG.

Objective 4. By the end of the first year, for at least 20 percent of parents in the EG who respond to both the pre- and the post-test Parent-Adolescent Form Survey, will indicate that communication with their adolescent children has improved. Furthermore, a greater percentage of parents in the EG than in the IG will report improved parent-adolescent communication when 1 and 2 year follow up measures are compared to pre- and post-intervention results.

Objective 5. By the end of the first year, the percentage of youth who report 3 or more personal assets on the AFL Core Questionnaire will increase by at least 20% for both EG and IG from the pre- to the post-intervention. Furthermore, the increase will be greater in EG than in the IG. In addition, for these same questions, the increase in personal assets will be greater for EG group than for IG at one and two year intervals after the intervention ends.

Objective 6. By the end of the first year, at least 20% of the youth in EG will report an increase, from pre- to post-intervention, in family connectedness on the YDP Teen Survey. Furthermore, at the 1 year and 2 year follow-ups, the percentage of youth who report an increase from pre- to post-intervention in family connectedness will be greater in EG than in IG.

Results, Discussion, Implications

This new project is in the first three months of the planning phase. Formal Memoranda of Agreements are being collected from participating schools. The research design is being finalized with the assistance of the Office of Adolescent Pregnancy Programs and the Research Triangle Institute International. Staff hiring and training, including the research protocol, are being conducted. The final research instrument will incorporate the OAPP Core Evaluation Instrument, which is currently being revised by OAPP. When the revised instrument is available, and the contract between the University of Oregon and NWFS is in place, work can start on preparing the protocol to submit to the university’s Institutional Review Board. When the agreements from the schools are all received, the matching and random assignment process will take place. The results of our planning so far are that all of the initial activities for beginning this exciting new project have been initiated. In discussing the results of our planning as of this writing, we are grateful for the wisdom of those in OAPP who designed this project and who insisted that adequate time for planning was essential. Coordinating efforts across multiple schools and agencies and adhering to their different bureaucratic policies takes time. Implications for the project and for the field of adolescent health from the results to date of the planning process include the following key points: For the project, the main implication is that careful attention to making sure that all partners understand what will be expected and that all are prepared well for their roles indicates that we can expect the project will be carried out as planned. For the field of adolescent health, the main implication is that it is possible to take the time to do advance planning that is critical to the success of well organized multi-site research projects.

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