



**The Evaluation of the Ateyapi Identity Mentoring Program in Rapid City, South Dakota**

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Intervention Name	Ateyapi Identity Mentoring (AIM) Program
Intervention Description	<p>The Ateyapi Identity Mentoring (AIM) Program is a tier 2 program designed to reduce participants' risk behaviors, including sexual activity, substance use, and antisocial activities. The AIM Program, an adaption of Project AIM, is composed of mentoring, classroom-based, after-school youth development lessons, and a variety of out-of-school activities focusing on learning and practice of the Lakota language, traditions, and games. The classroom instruction involves 16 Lakota cultural-based lessons designed to encourage young people to think about their desired future and how current risky behavior choices can adversely affect it. By envisioning future possible selves, youth can form an identity that could be threatened by risky behaviors, thereby motivating them to avoid risky behavioral choices. The AIM Program provides additional lessons on human sexuality, birth control, and sexually transmitted infection (STI)/human immunodeficiency virus (HIV) prevention. All of the lessons are integrated with Lakota practices, values, and traditions in helping adolescents make healthy choices. The classroom instruction is offered in groups of approximately 20 same-sex youth, with two groups running (one male, one female) in early fall, two in winter, and two in spring. Youth are assigned to the groups based on the schedule availability. Youth can also make up missed lessons in the summer. The AIM program includes mentoring of the students during and after school. Mentoring is not formalized, however the mentors are available to the youth as needed for such things as homework assistance. The mentors/instructors, like the youth, are Lakota and serve as role models to the students during the after-school lessons in addition to the in-school tutoring and mentoring. Students are committed to one year of active participation, with an additional year of mentor support.</p> <p>Rural America Initiatives adapted Project AIM by adding four components: (1) Five lessons on human sexuality, birth control, and STI/HIV prevention to the original 12 lessons; (2) grounding the classroom lessons in Lakota culture; (3) adding contact with mentors; and (4) adding out-of-school time activities to reinforce the program model.</p>
Counterfactual	Mentoring
Counterfactual Description	The control group also has access, as needed, to the same mentors as the intervention group, but during the school day only. Currently, the AIM Program is the only teenage pregnancy prevention program or youth development program being offered during or after school at the high school.
Primary Research Question(s)	<p>What is the impact of the AIM Program on recent sexual intercourse nine months after the offer of the program?</p> <p>What is the impact of the (AIM) Program on using safe sex practices nine months after the offer of the program?</p>
Additional Outcomes	Commitment to completing high school, knowledge about safe sexual behaviors and practices, involuntary sexual activity, self-efficacy and self-identify, drug and alcohol use, cultural identity and self-image, aggression and conflict resolution
Sample	At the beginning of each school year in one high school in South Dakota, American Indian students are recruited for the evaluation. The focus of the recruitment is 9th and 10th graders, but 11th and 12th graders are not excluded. Among the consented youth, half are randomly assigned to the intervention group and half to the control group. Each year approximately 240 youth consented, for a total sample of approximately 558 youth over three years (279 intervention, 279 control).

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Setting	The target population was American Indian students enrolled at a large high school in Rapid City, South Dakota. The high school has a total enrollment of 2,008 students composed of 70.3 percent white, 21.6 percent American Indian, and 8.1 percent other minority groups. The distribution of American Indian students from 9th to 12 <sup>th</sup> grades ranges from 46.3 percent (9th grade) to 10.8 percent (12th grade). This distribution reflects the low retention and graduation rates of the American Indian students over the four years of high school. For the first two years of the evaluation, the program was offered off site. The last two years, the program was based in the high school.
Research Design	<p>This study is a randomized controlled trial (RCT), with assignment of individuals to the intervention or control group.</p> <p>Random assignment occurred in the fall of each year for three years, after consent and baseline data collection. Participants were randomized equally between the intervention and control groups. Randomization was stratified by grade level and gender, to ensure equivalent distributions of those characteristics within the treatment and control groups.</p> <p>Survey data were collected four times: pre-intervention (baseline), post-intervention<sup>1</sup> (9 months post-random assignment), first follow-up (15 months post-random assignment), and second follow-up (21 months post-random assignment). The surveys were administered online in the fall and spring of each year.</p>
Impact Findings	To be determined when data collection and analysis are complete.
Implementation Findings	To be determined when data collection and analysis are complete.
Schedule/Timeline	Sample enrollment and random assignment ended in September 2013. Post-intervention data collection ended in May 2014. A final report, which focuses on immediate post-intervention data for three cohorts, will be available to the Office of Adolescent Health in 2015-2016.

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<sup>1</sup> A small number of youth received make-up lessons in the summer, the effects of which could not be captured in this survey.