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Moderator: Tish Hall
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Tish Hall: Good afternoon. Today we'll be interviewing Dr. Loretta Jemmott as a part of our developer interview series. The Office of Adolescent Health will be hosting a series of interviews with developers of those programs identified by the Department of Health and Human Services.

Teen pregnancy prevention evidence review as showing effectiveness in reducing teen pregnancy, sexually transmitted infections or sexual risk behaviors. The goal of this interview is to ask developers some of the most frequently asked questions by OAH grantees.

The Webinar series was developed as a technical assistance product for use with OAH grant programs to provide additional guidance on selecting, planning and implementing and evidenced based program for teen pregnancy prevention.

This Webinar should not be used on its own but as a complement to various other resources available online. Additional resources are identified later in the PowerPoint presentation.

Inclusion on the HHS TPP evidence review does not imply endorsement from OAH. Program selection is up to the grantees. So today we have the privilege of interviewing Dr. Loretta Jemmott.

She is one of the nation's foremost researchers in the field of HIV Aids, STD and pregnancy prevention, having the most consistent track record of evidence based program sexual risk reduction interventions.

As an expert in health promotion research she has led the nation in understanding the psychological determinants for reducing risk related behaviors. Her premier contribution is the development of the knowledge on how to best facilitate and promote positive changes in health behaviors.

Her research is devoted to designing and evaluating theory driven, cultural competent, sexually risk reduction, behavior interventions with various populations across the globe. Thank you for joining us today Dr. Jemmott. How are you?

Loretta Jemmott: I'm great. Thank you so much. It's a pleasure to be here and participate in this wonderful program.

Tish Hall: Great. So today we want to talk about Making A Difference. Could you give us an overview of the program goals for Making A Difference?

Loretta Jemmott: Making A Difference is an exciting program. The goals are basically to empower young people with the knowledge and confidence and skills to postpone sexual activity and practice abstinence.

And try to figure what do they need to do this, is it to increase their knowledge about puberty, religion, HIV, STD and pregnancy? We want to build positive attitude and beliefs about practicing abstinence, increase their confidence with skills in negotiating.

And refusal and problem solving skills for practicing abstinence. And to build their intentions and a sense of pride in practicing abstinence. And so part of it is to also perceive that they are at risk if they have sex for HIV, STD and pregnancy.

And if they will not do the behavior because they don't want to have those things happen to them and to also believe in their goals and their dreams for the future because if they goals and dreams.

They'll believe that if they engage in risky behavior that they won't be able to make their - achieve their goals and dreams. And so all those components will end there.

And if done in a very highly interactive way with small group discussions, films, activities, role plays, handouts and posters, the videos are appropriate for the population, the age and their culture and it's practicing feedback. It's a lot of fun and the young people like it.

It's not like the boring thing of sitting in your chair and this teacher didactic. It's really group facilitation with student's centric kind of feels and making and empower them to feel good about learning. They get out of their chairs. Up and down, interacting. It's a great curriculum and to engage young people in.

Tish Hall: Great. So having been a developer for this particular program could you briefly talk about the previous evaluation results? Is there evidence related to the dosage and exposure required to produce the desired outcomes? And is there evidence that suggests how long program effects might last?

Loretta Jemmott: Well Making A Difference is the curriculum that was one of the first curriculums out that was evidence based for abstinence. And it's an abstinence based program, not an abstinence only program.

And so in this study what we did was randomly assigned about 659 young African American sixth and seventh graders to either an abstinence based

program, a safer sex program or a controlled group for health promotion. And it was like an eight hour curriculum divided over two Saturdays.

So the kids would come on a given Saturday to pretest, get the four modules, come the next Saturday, get the last four modules and then they would take a posttest and get evaluated three, six and 12 months later.

And comparing (unintelligible) group to the control group we found a reduction in sexual activity, delay in first sexual experience among virgins and with those, in particularly in virgins were less likely to report sexual intercourse after the first three months of the program.

We had increased beliefs about pregnancy and prevention of HIV, prevention through abstinence and increased belief that abstinence would help them achieve their goals and dreams. So this is an exciting program. It got published in the Journal of American Medical Association.

We call it JAMA. The first idea every published that had this kind of effects and outcomes.

Tish Hall: Great. Great. Is this program specific to a certain population and if so could you talk about what populations or target groups the program could be effectively implemented in?

Loretta Jemmott: Well, the program that we evaluated was African American young people ages 11 to 14 in urban areas. But we have implemented it across the country in various programs and cities and with multi ethnic and racial groups ages 11 to 14.

And some places who released it were to have young people focus on abstinence between 15 and 18 have used this program too. They use it in mixed gender group, same sex gender groups and it's been an exciting time.

And so we really like this program and young people and families and communities really want certain people to practice abstinence and this is one of the models that works.

Tish Hall: Great. So let's talk about settings. We haven't talked about where the program is implemented. Where exactly are some of the settings that this particular program, Making A Difference is actually implemented.

Loretta Jemmott: Well when we did the study we did we did it on Saturdays but it was in a controlled setting that we recruited our list to come to from schools but it has been used in schools during the day time when teachers have allowed it. Used in after school programs.

It has been used at various youth service organizations, community based organizations, group homes for teens. Some places have used it in clinics for adolescent medicines. But it's really been an excellent program for young people in different settings around the country.

Tish Hall: Great. So let's talk about potential and successful adaptations that have been approved by the program. Before we get into that I want people to know that OAH has to approve sometimes with the developer's assistance adaptations for the program.

But could you take a moment to talk to potential grantees and grantees about adaptations that have been made or can be made?

Loretta Jemmott: This is some adaptations that we made along the way because like I said we did the program and the study in the classroom - excuse me, on the weekend where we were really structured with time.

And so we see that if you use this in a real world setting there's a lot of adaptation that we have to do to make it happen. One is the settings that we want to do for timeframe. So the eight modules can be delivered in four different ways, or lots of different ways.

We did it on two consecutive Saturdays, four modules at a time. However, you can do it one module a day for a week or two per week, or depending on your settings you could really adapt anyway to meet the needs of your population.

Because the current issue in the middle and the high schools some times are difficult so you've got to deal with some of the time issues. There's an adaptive time implementation plan for doing it.

You also have seen adaptations with group size, smaller groups, larger groups, because we did the study with six to eight young people then the real world setting you may need to have 15 to 20, to 25 or 30. So we see adaptations for group size. We've also seen adaptations for facilitators.

The facilitator let's say we're African Americans but over the years we've seen people who are African American, Latino, White, Asian can be facilitators and peer facilitators are good too. And a lot of people from different professional backgrounds have been used as facilitators.

A couple of more adaptions are have been the settings where we can use it like the LGBT community where we haven't done it before which has been

people been talking about doing it and somebody said it works well with them.

Or community agencies serving disability youth or youth with disabilities which is incredibly important. Another issue is a cultural relevance. Sometimes the video or the names of the participants in the role plays or the games don't match the names of the names of the people of the community you're serving.

So you have to adapt it for those names and other issues that make it culturally appropriate while maintaining the core elements and the integrity of the program. And we're very excited about all those different populations that want to use it.

Tish Hall: Great. I think that's wonderful that there have been so many adaptations that have been made. One of the things that is key for successful implementation is staffing. Are there any recommendations that you could make about staff qualifications or skillsets that need to be had?

Loretta Jemmott: Well staffing number depending on your budgets. I don't want to talk too much about your numbers because some people have two staff or assistances but you need people that want to be doing this and it's all depending on your budget.

But basically you're staff needs to have great experience and background in working with young people. So they have to at least go through a two day training program to do this program.

But we want people to have professional background as a nurse, a teacher, health educator, or social worker or counselor. Somebody who has worked

with young people. Formal training is recommended to go through the curriculum.

Like I said earlier we want people to have experience working with multi-racial youth, from diverse backgrounds, having group facilitation skills, comfortability in talking about sex is critical. People that can't talk about sex with teens cannot do this program. So that has to be really clear.

And most importantly to me you've got to be able to relate to young people and their life circumstances. A lot going on with young people today so you've got to believe in them and believe in their resilience.

And if they can feel that you care about them this way they will do what you want them to do to try to be safe because they know that you're doing it from a motive of caring about them and you try to build their confidence to do it. So, yes.

Tish Hall: Great. So you talked about the training requirements. There are two specific training modules or requirements that you have for this program?

Loretta Jemmott: Yes, we have two different models, the training the facilitator model which is a two day training. And this model is basically designed to, you know, to train facilitator who are going to be the front line people going out here to do the program under the skills necessary to implement them.

So to build their skills and confidence to do the program that their reaching out with. The second type of training is the train the trainer model which is a three or four day program depending on your organizational needs.

Costs vary depending on group size and needs and it's also available to be ran at your site, it could be at our site and someone could be at the university. It could be a regional conference or national conference you might do a training.

Or you could be doing it from us through the Jemmott Innovations Group or partner agencies such as Healthy Teen Network, JSI, ETR, Healthy Teen Network and Select Media.

Tish Hall: Okay. So I - have there been challenges and strategies for success that you'd like to talk about, about Making A Difference?

Loretta Jemmott: Yes, there's been challenges. Yes, yes, but we've got some great strategies for success. And so some of the challenges are, you know, attitudes of school administrators and teachers and parents about sex education in the schools has been an issue when we first began.

It's calmed down a little bit now but it used to be very intense when we first began. But what we did was to be successful we would go to meet with the board, principals, parents to discuss their issues and their strategy so that we could work together and resolve them.

Another issue was that same thing I was saying earlier, in class size. Classroom's being very large with limited time because the bell rings and the students aren't paying attention and not really listening yet and the student's absenteeism because students aren't there every day.

So they miss different components which we call a dose effect. So to deal with some of these issues you might want to do it after school or off campus youth service agencies to make a program.

But also reach out to partners for wrap around services if they can get it augmented there and some places have used incentives to get kids to participate.

Tish Hall: Okay. Great. Are there any recent or planned revisions for Making A Difference?

Loretta Jemmott: Right now, the edition out right now is the 2012 edition is out. That's been ready to go. They're looking now to make sure everything is okay before we get ready for this new round so we're looking at it now carefully. But we're Making A Difference within the school setting.

You know, I just told you we're dividing it up to be ready to be used in schools with 40 minute modules, is ready and that's the 2014 curriculum and for information about the manuals or curriculum you can get them from Select Media.

Any training materials that you need for training manuals you get from Jemmott Innovations Group.

Tish Hall: Thank you Dr. Jemmott. One this next slide that you will see you will find additional resources on Making A Difference. We hope these resources in conjunction with today's Webinar will provide a comprehensive understanding of the evidenced based teen pregnancy prevention program.

And will assist you in making not only an informed decision on which evidence based program to select for your community but how to best prepare for and implement the program. Dr. Jemmott do you have any additional or final words?

Loretta Jemmott: Just like you say, Making A Difference has been out for a while and people around the country have really, really loved using it. This was the first abstinence program that has been out and parents are really raving about it.

And schools and young people so if you choose this program you'll be excited about having an evidence-based program that meets the needs of the young people so I'm excited.

Tish Hall: Well, thank you so much for taking the time today to put together the information and to present it to our grantees. I know that they will find this information helpful and I thank you for sharing it this afternoon.

Loretta Jemmott: Thank you.

END OF MAKING A DIFFERENCE