

NWX-OS-OGC-RKVL

Moderator: Jaclyn Ruiz
January 30, 2015
10:00 am CT

Coordinator: Welcome and thank you for standing by. Today's call is being recorded. Should you have any objections, you may disconnect at this time. You may now begin your meeting.

Jaclyn Ruiz: Thank you. Today we'll be interviewing several speakers in respect to the evidence-based program Respeto/Proteger as 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 having shown effectiveness in reducing teen pregnancy, sexually transmitted infections, or sexual risk behaviors. So the goal of these interviews is to ask developers some of the most frequently asked questions by OAH grantees.

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

This Webinar should not be used on its own but as a compliment to various other resources available online.

Additional resources are identified later in this PowerPoint presentation. Please note inclusion on the HHS TPP evidence review does not imply endorsement from OAH. Program selection is up to grantees.

For today's call, we'll be interviewing Dr. Deborah Koniak Griffin who is a professor and Audrienne H. Moseley Endowed Chair in Women's Health Research and Associate Dean for Diversity and Equity at the UCLA School of Nursing. She is a founding director of the UCLA Center for Vulnerable Populations Research. The mission of the Center is to work towards eliminating health disparities by collaborative projects.

Dr. Koniak Griffin has received several grants for her studies with pregnant and parenting adolescents including support from the (Theater) California and the National Institute of Nursing Research to test the intervention for Respeto/Proteger ahead.

This intervention was developed through a community academic partnership involving Jerry Tello and Dr. Janna Lesser. Earlier work has led to two evidence-based novels for pregnant adolescents and young novels.

In addition to Dr. Koniak Griffin, we'll be interviewing Mr. Jerry Tello who comes from a family of Mexican-Texan roots and was raised in South Central Los Angeles. He's an internationally-recognized expert in the areas of fatherhood, family strengthening, community peace, and mobilization, and culturally-based violence prevention intervention issues.

Over the last 30 years, Mr. Tello has dedicated his efforts to preventing and healing the pain of relationships, community violence, teen pregnancy, fatherlessness, and internalized oppression by speaking to over half a million people and training thousands of facilitators across the nation to address these issues. He is the co-founder of the National Compadres Network established in 1988 and the present director of the National Latino Fatherhood and Family Institute.

Finally there is Dr. Janna Lesser, associate professor, who also serves as the director of the UT Health Science Center San Antonio School of Nursing Center of Excellence, Community-Based Health Promotion with Women and Children.

This Center promotes community-based participatory research for community academic partnership research, a research method that unites communities and academic researchers in the common goal of addressing community-identified needs through a process of sharing power, establishing trust, fostering co-learning, enhancing strength, and ultimately, building community capacity.

The Center promotes research that involves collaboration with the community to address health disparities among women and their families, health disparities that are associated with social, political, and economic issues such as poverty, inadequate housing, racism, and lack of access to health resources.

Welcome to you three. I'm going to go ahead and start off with handing it over to Janna. If she can please briefly describe the program Respeto/Proteger ahead.

Janna Lesser: Thank you. Respeto/Proteger is a culturally-rooted, couple-focused, and asset-based HIV prevention program that, as you mentioned, was developed

through a community academic partnership project for young Latino parents. It's a twelve-hour curriculum building on feelings of parental protectiveness while integrating cultural teachings and motivation to reduce risky sexual behavior.

The HIV-related content includes HIV awareness, understanding vulnerability to HIV infection, disease prevention, condom use skills, and sexual negotiation skills. The parental protectiveness is fostered through specially-designed discussions and writing activities that integrate traditional or cultural teachings.

The facilitation is based on the use of an espejo or mirror process of teaching using strategies such as story-telling and reflection. And the role of facilitators is to be not only teachers and guides but also role models and nurturers. Therefore, special training is required. And Jerry, could you speak a bit to the core curriculum which is the basis of the project?

Jerry Tello: Yes. Thank you. The foundation of the curriculum and the process is really rooted in the thought that from the positive side, all of us have some culturally-rooted teaching. And especially when we're talking about Latino families - but other families, other cultures as well. There's some teachings that have been passed on that are related to values.

And so what we attempt to do in the curriculum is really explore and uplift those values while separating the parts that have not been helpful. And we find in couples that in relationships, unless we really address those things, that sometimes the woundedness gets passed on. So we're really looking at the resilient, positive aspects of cultures, traditions, and processes of interaction that we want to uplift that are positive. And that's really the basis of the philosophy in the curriculum. Janna?

Jaclyn Ruiz: Thank you. Do you want to expound a bit on the delivery method? I don't now if you addressed - sorry, I apologize - any technology requirements that might be needed?

Janna Lesser: Oh, I apologize. Okay, so there are some DVDs or videos, but that would be the only technological equipment that would be necessary.

Jaclyn Ruiz: Oh, great. Do you mind briefly describing some of the previous evaluation results you've had?

Deborah Koniak Griffin: Yes, this is Deborah. And we conducted two studies. And the first study was a pilot study to develop and test the HIV prevention program for young Latino mothers and fathers.

It was developed through a community-academic partnership involving the National Latino Fatherhood and Family Institute with Jerry - which was affiliated with Bienvenidos Family Services and UCLA's School of Nursing.

The program was tested in Southern California with 49 co-parenting couples or 98 individuals - but they were co-parenting - who were predominantly Latinos and child rearing. Participants ranged in age from 16 to 20 years.

Our findings at the six-month follow-up, which was our endpoint for this study, showed that the proportion of unprotected sex episodes for both females and males was significantly decreased in the intervention group compared to the comparison group. There also was a significant increase with intentions to use condoms and AIDS knowledge for participants in this group.

We followed this study up with a second study which was funded by the National Institute of Nursing Research to conduct a randomized control trial, a larger trial, which involved 168 co-parenting couples who also were in Southern California and predominantly Latino between 14 and 25 years of age who were both English and Spanish speaking. So the population was larger and a little bit wider in age range.

The intervention was the same as in the pilot study, but the follow-up lasted one year. And the results were similarly positive in terms of decreasing unprotected sex in the intervention group, and increasing the intention to use condoms from baseline to six months. AIDS knowledge also significantly increased.

Although we have no findings related to the dosage required to produce the desired effects, our data suggests the need for a maintenance, a boost of types, of intervention. For some of the behaviors were not sustained beyond the six month follow-up - so they declined at 12 months.

Jaclyn Ruiz: Thank you. Can you expand a little bit about the population that the study was evaluated on, as well as any recommendations that you have for populations that this intervention can work with?

Deborah Koniak Griffin: The population was predominantly Latino. There were some African American in small numbers and other mixed groups. They all lived for these projects - so they both were done in Southern California in urban settings. And they were English or Spanish speaking.

One of the requirements was that they be co-parenting, but we believe that the program is appropriate for teen couples raising a child from diverse cultural

backgrounds. And I believe that Jerry will talk more about this in a few minutes.

Jaclyn Ruiz: And so just to sort of expand before Jerry gets to talk a lot about the adaptations and cultural relevance, can you expand a little bit about the evaluated setting?

Deborah Koniak Griffin: Okay. We evaluated the program in many sites because we wanted to have the classes where it would be convenient for the couples often with their child to reach. So we actually held the classes near the young mothers' and fathers' homes whenever possible.

Sites for our classes included alternative schools, health clinics, community-based organizations - we used libraries some of the time - community recreation centers. But it's important to realize that although there were many sites used, these were not separate studies. In other words, we had series of classes that were conduct in these sites.

We don't have data to indicate that one setting verses the other would lead to better effects because they were all part of the same study. We do believe that there are other potential sites that the projects can be implemented in - for example, regular schools, juvenile probation departments.

Jaclyn Ruiz: Okay. Sounds great. So while adaptations require OH prior approval and at times approval by the developer, it can be helpful for organizations to get a sense of previous adaptations that have been successfully implemented. Can you provide some examples on the types of minor adaptations that are allowable?

Jerry Tello: Well, and I can speak to that. You know, obviously the population that we dealt with - although primarily Latino, we did have African American and other populations as well. In the training, and one of the reasons we require the training, is that we go over how to modify your teaching approach and examples to make it relevant to the population you're dealing with.

Many times in delivering this curriculum, the issues of day to day life come in - issues of generational issues that come in as well. So it's real important that the facilitator is connected to the issues and is able to relate to deal with.

The training that we do is about how to modify your approach, and how to modify your delivery, and how to use relative examples when working with different populations. We've used this curriculum and other curriculums with very mixed populations in which they have been, you know, predominantly in rural areas.

The real significance is having facilitators that can relate and provide relevant examples and make the teaching appropriate to the circumstance and to what the couple and the individuals are dealing with. And so we have made those adaptations. Sometimes we'll do the program all in Spanish, and sometimes it's all in English.

But having facilitators that are bilingual are important too, because then sometimes the examples that the couples use or the questions they have may - it may stem from a cultural base. So for them to be able to understand that as well. So the training is really focused on preparing facilitators to really address those multiple issues.

Jaclyn Ruiz: And I just sort of want to ask a clarifying question about the settings. It seems as if - and please correct me if I'm wrong - it seems as if the setting is

negotiable as long as it's an area where you can target the population that this is intended for. Is that correct?

Jerry Tello: A lot of it - we try and make it convenient to the couples so they can get there. So a lot of times you have to consider transportation. And many of them don't have cars, so they'll take the bus or some of them have to walk. And, you know, there's many considerations. So we want to make it convenient to where the participants can attend, also considering safety as well.

But make the environment something that the couples feel comfortable in coming to. So for example, we probably would - it was a case of the couple we worked with - not choose a police department, even though they have community room. Because sometimes that's not a welcoming environment for some couples. Although we have used probation facilities and used community facilities as well. So that's the purpose of that.

Jaclyn Ruiz: Thank you for that clarification. And I think a lot of what you touched upon, Jerry, I'm about to expand or ask you to expand upon. Can you talk anything about - either three of you - the staffing recommendations you have for successful implementation? And then also any additional information you want to talk about in terms of training?

Janna Lesser: So this is Janna. I'll speak to the staffing and then I'll turn over more about the training to Jerry. We developed this program to be facilitated by two individuals, one male and one female. Sometimes we have gender-segregated groups for certain of the activities and then come back for group discussion. So it's very important to have one male and one female.

And at least one of the facilitators if not both must really have experience working with the target population. And it's helpful if one of the facilitators

has some kind of healthcare or health education background. And in terms of the training considerations, I'm going to turn that over to you, Jerry.

Jerry Tello: Yes. In the training, what we're really looking at is preparing the facilitators to be able to deliver the content, but also to create a process - a process where the couples can feel comfortable, where we can really tap in to all the issues and also the resiliency values that come from the couple as well. So the training is a very targeted training.

And part of it is to allow the facilitators also - many times can become familiar with the some of the cultural issues, some of the cultural barriers, that young people who are not only, you know, raising children but in relationships.

Sometimes there are certain aspects of their relationship that really need to be addressed - maybe wound from the past that they've grown up in, or the environment that they're in, dealing with gender-specific issues but also dealing with communication issues and value issues and, you know, conflict-resolution issues.

All these things we find very pertinent then to them valuing each other as individuals and as a couple, which we have found then leads to, you know, more self-worth, more worth as a couple. And then that leading them to then making choices that are value-based. And so the training goes into all of this, you know, from the standpoint of content, process, and group facilitation as well.

Jaclyn Ruiz: I would just like to ask - a lot of times our grantees want to know if a training of trainers model is available. I'm reading sort of the points that you have on slide 11, sort of intricate details that it seems as if the facilitator training goes

into. So I just want to ask - do you guys have a training of the trainer, or is it - because I hear sort of specialized, targeted training - is that not something that's available at this time?

Janna Lesser: That is correct.

Jerry Tello: Yes.

Janna Lesser: Yes. It's not.

((Crosstalk))

Jaclyn Ruiz: I'm sorry, Jerry. Did you want to say something?

Janna Lesser: I was just saying that there isn't a trainer-trainer program at this point, but Jerry might have had something to add to that.

Jerry Tello: That's fine. Yes.

Jaclyn Ruiz: Okay. Thanks, Jerry. Thanks so much. I'm sorry - so can you describe some implementation challenges that you're aware of? And if possible, any strategies that you've known organizations have used to overcome those challenges?

Janna Lesser: So this is Janna again. I would say that the most challenging part of the two projects was actually the recruitment of the couples into the program. Once we were able to recruit them in and they came, then they would come back. But as you can imagine, to get two individuals who both have lots of challenges but also responsibilities in their lives to be able to come at the same time - it requires some flexibility.

And sometimes, for example, the couple - if you have it on a Saturday - they might both be intending to come. But if a job opportunity comes up for one of the partners, then they're going to choose that over coming to the program. So only one partner might come that time. So those are - just kind of in general, being aware of the contextual issues and complexities in the young folks' lives.

Some of the things that made it, I think, easier - again, speaking to what Deborah and Jerry spoke to about having the program somewhere that is convenient in terms of the location as well as a safe setting - we did actually help with providing transportation in some cases. We also provided childcare, and we also provided some kind of meal or snack. Because again, in somebody's busy day they need to make sure that they get nourished as well.

Jaclyn Ruiz: Thank you. And I know Jerry did mention... Oh, I'm sorry - was there more that you wanted to add, Janna?

Janna Lesser: No. No, thank you.

Deborah Koniak Griffin: I have one other thing that I would like to add. This is Deborah. I spoke recently with a group that's planning to write a grant using this intervention.

And what they're doing in the preparation phase to help with the recruitment is creating a network of community partnerships that would all collaborate in referring people to the program. And I think that it's a more rural area. And that could be an effective way to increase the potential for participation.

Jaclyn Ruiz: Thank you. I can actually do a little OH plug. We have an E-learning model that we developed about, I think, selecting, planning, and implementing evidence-based program models. And one of the things that we do talk about is sort of identifying your stakeholders and making sure to work with your community. So I just want to throw that out there for our grantees to look at. But that's a very important thing to know.

Deborah Koniak Griffin: The one other thing that may be helpful too is if you create an umbrella - at least a referral of services - so that if people need additional assistance that can't be offered through this program, you have a network of agencies or facilities that can provide specialized services.

Janna Lesser: Yes. I'm glad you brought that up, Deborah, because that is absolutely necessary to have a safety net. Because this - you have to be able to make sure that, you know, you're sending your young people out safely every time they leave.

Jaclyn Ruiz: Thank you for that information. So on Slide 13 you'll just see information about recent or planned curriculum revision. And then on slide 14 you'll find additional resources on Respeto/Proteger.

And we hope that these resources in conjunction with today's Webinar will provide a comprehensive understanding of this evidence-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 this program. Any final words?

Deborah Koniak Griffin: Well thank you very much for having us. Thank you very much, Jaclyn.

Jaclyn Ruiz: And I just want to thank you all so much. I can hear Jerry is probably in commute, so I know you guys were super busy. And scheduling three people at once can be very difficult.

And so I really appreciate you guys being able to work your schedules out to put this information together and present this to our grantees. The information that you shared today will be invaluable to them. And I know they'll find it incredibly helpful. So thank you again. And (Christine), if we can please end the recording at this time?