AMY: Good afternoon. My name is Amy, and I will be your conference operator today. At this time, I would like to welcome everyone to the Selecting Teen Pregnancy Prevention Programs for Native American Youth conference call. All lines have been placed on mute to prevent any background noise. After the speakers’ remarks, there will be a question and answer session. If you would like to ask a question during this time, simply press star and the number one on your telephone keypad. If you would like to withdraw your question, please press the pound key. Thank you, and you may begin your conference.

MS. MILA GARRIDO FISHBEIN: Good afternoon and welcome to Selecting Teen Pregnancy Prevention Programs for Native American Youth. My name is Mila Garrido Fishbein, and I’m the Program Manager for Healthy Teen Networks.

MS. VANESSA GEFFRARD: And I’m Vanessa Geffrard, the Training and TA Associate at Healthy Teen Networks. Thank you for being here. So before we begin, we’d like to review the objectives for today’s webinar. At the conclusion of this 75-minute webinar, you will be able to describe the process of assessing program fit and selecting an evidence-based or effective teen pregnancy prevention program or programs for serving Native American youth, apply culturally sensitive strategies to their program while maintaining fidelity to program core components and share specific examples of adaptations for Native American youth applied by other grantees. Please note that we’ve scheduled today’s webinar for 75 minutes to make sure we have sufficient time for questions at the end. Also, we recognize that many folks identify in different ways. But for the purposes of this webinar, we will be using the term Native American youth.

It is our expectation that the webinar will answer many questions and concerns of grantees. Additionally, every attempt will be made to answer questions posed by participants at the conclusion of the webinar. Questions may be typed in the chat box at any time during and at the conclusion of the webinar.

In terms of using the Webex software, I like to briefly review how to use the chat box, white board and polls. You may ask a written question at any time by using the chat box at the
bottom right-hand corner of your screen. And please look at your screens to see where the chat box is. And as you can see, Mila’s typing welcome to the webinar.

All right. So next, to use the white board features, you can use the icons at the top left-hand side of your toolbar. I’d like you each to write your name and organization on the white board just as you would if we were all meeting in person and doing introductions. And if you have any problems and can’t locate it, just let us know. Thank you, Julie. Thank you, Lisa. Hey, Olivia. Hey, Brighton. Terry, Alicia, Tricia, Kris, it’s all great to see you. All right. So we’ve got that down.

All right. To respond to a poll, look at the lower right corner of your screen and click on the answers that reflect your opinion. We’ll be getting to that in one second. Give us a couple of seconds. All right. So does everyone see this on the lower right corner? We’ll be asking you a couple of polls throughout, and you’ll be using that poll function at the lower right-hand corner of your screen.

So now I would like you all to respond to the following poll about the program or programs you have either selected or are considering. So, our question again is what program or programs have you selected or are you considering? And you’ll see there on our poll, there are many different responses. I will give you a couple of seconds to fill that out. Five, four, three, two, one. All right. Now we’re going to close the poll. And in a couple seconds, we’re going to show the poll results so everyone can see what kind of programs you’re using out there. All right. So it seems that a couple of you are using All For You, the Carrera program, Draw the Line, Respect the Line. Another handful are using It’s Your Game, Keep it Real, Reducing the Risk, Teen Outreach Programs and there are some others and another handful had no answer. So maybe throughout the webinar, we can discuss some of those other programs that some of you are implementing during the question and answer section. So next, Mila is going to discuss fit.

MS. MILA GARRIDO FISHBEIN: Thank you, Vanessa. For the purposes of this webinar, we are going to approach fit and selection a little differently today. The program emphasizes the same somewhat rigid rules. We are going to talk about how to select an evidence-based
program that we know has been proven effective for your population, but addresses the risky behaviors you have identified among your target population and does achieve potentially similar changes in behavior to those that you wish to achieve.

We are going to move beyond the tables of evidence-based programs and understand why these programs are considered evidence-based and how they can potentially improve outcomes across a broader range of youth than those for which they have been proven effective.

All of you have completed or are near completion of your community needs assessment. It is now time to select or reassess your initial selection of the best evidence-based program that will meet the needs of your youth, be compatible with and accessible to your community and be doable within your implementation site and help you achieve your stated goals.

There is a lot of encouragement in the field for only using programs that have been proven effective for certain populations, especially for whom the program was designed and tested on. This can be very limited for selecting a program for Native American youth as very few have been shown to be effective with this population. But the lack of proven effectiveness is a matter of not having been tested with Native American youth. Not that they weren’t or could not be successful with these youth.

Additionally, all evidence-based programs are based on a finite number of theories, shared similar goals and often used similar activities to achieve these goals. In other words, they and the youth they target have more similarities than differences.

As part of today’s webinar, we are going to focus on how to look beyond the tables of approved evidence-based programs to select a program to fit your population by looking deeper into the similarities as opposed to the difference. It is important to note that at this point, you are not going to be making adaptations. Rather, you are just going to be considering programs for fit.
And as part of this process, you are going to be thinking through essential adaptations that might be necessary in order for a program to fit the youth, the communities, your organization and stakeholders that you are working with.

While there is no single standard for making decisions about adapting programs, there is a simple model for adaptive programs. But that’s a topic for another webinar. For now, we would like to focus on how to select a program that actually fits.

First, however, it will be important to make sure that we are all on the same page by revealing some key definitions. What is evidence-based programs? Also known as evidence-based intervention, evidence-based program is a program proven through rigorous evaluations to be effective at changing sexual risk-taking behaviors among youth.

Although there are countless teen pregnancy, sexually transmitted infections and HIV prevention programs being implemented throughout the United States and internationally, only some have been proven effective in changing sexual risk-taking behaviors and not included on the Office of Adolescent Health list of evidence-based programs.

That is not to say that a program not included on the Office of Adolescent Health list of evidence-based programs is necessarily less effective than others on the list. It may simply mean that the program has not been rigorously evaluated and [inaud.] for inclusion.

To be considered effective at changing sexual risk-taking behaviors, evidence-based programs on the OAH list must have demonstrated evidence of a positive and statistically significant impact on at least one of the following outcomes: (1) Sexual activity, such as initiation of sex, frequency of sex, rates of vaginal, oral or anal sex, number of sexual partners. (2) Contraceptive use. That is consistency of use or want of use for either condoms or another contraceptive method. And (3) sexually transmitted infections and/or pregnancy or birth.
To recap, evidence-based programs are based in theory. Targets to change knowledge, attitudes and behaviors regarding certain risky behaviors and have been demonstrated to change behaviors among certain populations of youth and for a certain period of time.

So when selecting an evidence-based program, it is critical that you consider other acts of an evidence-based program beyond the population for which it was designed. That says are your goals and do they match the goals of the evidence-based program that you are considering? Are the principles of the program aligned with the principles or beliefs of your community?

If you have identified a risky behavior you want to target, are they the same risky behaviors targeted by the evidence-based programs that you are considering? Are the activities that are core to the evidence-based program acceptable to your community? How can you adapt or tailor the activities to be more culturally acceptable?

Then you have to ask yourself, can you provide the training and technical assistance and other supports to promote effective implementation of this program? Do you have fiscal, established sources to support the implementation? And then is implementation with fidelity likely to occur with this program?

None of these questions address the population yet. All are necessary to select a program that fits your needs. Acceptable adaptations can make an evidence-based program which meets all of these needs, but may, for example, be designed for African American urban youth, be a great fit for your youth.

Shortly, we will look at some specific examples. But first, we will orient you to a tool that may help you determine if a program will meet your needs.

To assist you in assessing a program to select for fit, Healthy Teen Network has program fit checklists. Two that I think you could use and it would be very helpful. You should have received these two separately. But if not, we will be sure to distribute it to ALOM with an electronic version of the class.
The tool is pretty straightforward. It walks you through each of the five steps of assess a program for states. Each section is color coded for ease of separation. And the key questions to consider for each step are listed, along with a table for capturing your information.

Step one in this checklist is to assess steps with a participant, that is, the youth that you will be working with. As you can see from this excerpt, you have a table set out where you can log the critical information, both about the program as well as about your potential participants. So you can recommend if the step is sufficient and finally describe potential adaptations needed.

Here we have a part of the tool showing the table for capturing information on age, race, ethnicity and sex. So now we’re showing an excerpt from step two that assesses fit with your organization. Again, here you see the questions to consider a provider, as well as a table for recording your information.

In this excerpt, you can see that you must compare the program goals with the mission, vision and values of the implementing organization. As well as it says if the match is sufficient, but if potential adaptations are needed. The next rule asks about program settings compared with the intended setting for implementing the organization.

For the third step, you will assess fit with the stakeholders. Here you see what you are asked about community resources. Is another group already implementing similar efforts? What are the existent resources in your community, in your organization? And again, you are asked to check if the fit is sufficient and if there are any potential adaptations needed.

The fourth step is to consider adaptations that will improve fit. Here, the tool provides spaces for describing potential adaptation, affirming the potential adaptations to maintain the core components and fidelity as well as the space for considering the cost of the potential adaptation. Whether staff training is required, the difficulty of the adaptation and whether additional materials will be required. I do want to note that each of the screen shots provided of the tool thus far have been excerpts. For the tool for steps one to four, you will want to fill in the
information requested in order to answer the questions for each step. And you will need to fill out a new tool for each potential program as you assess it for fit.

In other words, if you were assessing three different programs, you will fill out the tool three different times, once for each program. Obviously, some parts of the tool will be easier to fill out subsequent times. As the information about your youth, community and organization will not be changed. For this reason, we do have the tool available electronically for download on the Health Teen Network website.

However, in step five, the tool allows you to look at all the potential programs together. In this step as you can see, you will narrow the number of potential programs. The tool provides you with the room for summarizing your assessments, comparing each of your potential programs all in one space. You identify the program and the level assessed based on information gathered in steps one to four. Check yes or no to indicate if the program is recommended for implementation with fidelity, and you also have the space for any notes.

Healthy Teen Network’s program fit checklist two provides you with a comprehensive way to move through step one through five, considering the relevant questions for each step.

MS. VANESSA GEFFRARD: So now that you have a tool for assessing fit, we want to share specific examples of evidence-based programs and how they might be used with Native American youth. We are going to briefly review some of the key elements of these five evidence-based programs, many of which have been selected for use among Native American youth, where there are similarities and differences and how they might be easily adapted for use with your youth.

The five evidence-based programs we’re going to review are Becoming A Responsible Teen, also known as BART; Assisting Rehabilitating Kids, ARK; Draw the Line, Respect the Line; It’s Your Game and the Carrera model. Please note that these programs are being used solely as examples for education purposes. Neither HTN nor FYSB is endorsing the use of these specific programs.
The first two programs we will talk about are BART, Becoming A Responsible Teen, and ARK, Assisting Rehabilitating Kids. To give a brief overview of BART, the goal is to clarify values and stress communications, negotiation and problem-solving skills. It is for both genders ages 14 to 18. It is usually conducted in non-school settings. It has eight sessions, 90 to 120 minutes each. BART stresses abstinence, includes condom demonstration and each group should have a male and female leader.

While BART was designed and found effective for African American youth, it has since been tested on other racial-ethnic groups, not Native American youth, however, and not as rigorously. One can assume, however, that BART could be culturally adapted and used with Native American youth if the goal, timing, setting and leader needs are aligned with the target community and population.

No tribal grantee has currently selected BART. But we included it here because of the tie with ARK and because the principles of Kwanza that BART is based on could very easily be adapted to reflect principles of Native American communities. In some cases, the principles as they are written match those of Native/tribal communities.

ARK is on a number of other lists such as CDC and National Campaign’s list, for example, as an evidence-based program that was tested on Native American youth and was successful in changing risky sexual behaviors as shown above. ARK is a twelve-session program designed to increase abstinence, safer sex and reduce risky sexual behaviors in substance-dependent youth.

The program is delivered in small groups after the participants have received their detoxification drug treatment. ARK is adapted from BART. The program encompasses two sessions on HIV information, five sessions on risky sexual behaviors, four sessions on problem-solving skills and anger management and one session on motivational aspects of behavior change.
ARK was probably not a program that you initially considered. But given the particular nature of the program, however, it was included here because it promotes safer sex practices and was tested with Native American youth.

So now I want to discuss Draw the Line, Respect the Line and It’s Your Game, Keep it Real and Carrera model. So first, we have Draw the Line, Respect the Line. Draw the Line, Respect the Line is a program used to delay sex and increase safer sex through establishing and maintaining limits. Draw the Line, Respect the Line includes 19 classroom sessions that can be given during a standard 45- to 50-minute classroom period.

During the first year, sixth grade students participate in five lessons focused on using refusal skills in non-sexual situations. In the second year, seventh grade students have seven lessons that address setting sexual limits, understanding the consequences of unplanned sex, handling pressures regarding sexual intercourse and practicing refusal skills. In the final year, eighth grade students receive seven lessons on practicing refusal and interpersonal skills in participating in activities regarding HIV, STD education. It was tested in Northern California and the evaluation found no statistically significant program impact for girls on any of the program outcomes, but was positive for males.

Draw the Line, Respect the Line has been selected by the Choctaw Nation of Oklahoma. Therefore, peer support would be available. Challenges lie in the length of the program and maintaining steady staff and participation over three years.

Next we have It’s Your Game. It’s Your Game is an intervention developed to prevent HIV and teen pregnancy. It focuses on healthy relationships, risky behaviors, setting limits and reproductive health topics, including contraception. It is a school-based program that targets middle schools. It is a computer-based intervention that consists of 12 lessons in both seventh and eighth grade and engages parents. The evaluation study results showed delayed sexual initiation after 24 months.
It’s Your Game requires computer access for all participants over the two years of implementation. The test population was 44 percent Latino, but the program works for all racial groups tested. However, Native American youth were not identified as part of the intervention population.

The Inter Tribal Council of Arizona will be implementing It’s Your Game across three regions as part of a randomized control trial funded by CDC and supplemented with tribal PREP dollars so that this program’s effectiveness with Native American youth will be known in about three years. Any other grantee selecting this program has the advantage of peer support and contributing to the outcomes. Also, some of the activities of the program are being adapted some to resonate with Native American youth.

Next the Carrera model. Carrera is challenging, but potentially rewarding and is a great program to undertake. It requires unique staffing and substantial resources. The Carrera model is a comprehensive, multi-year youth development afterschool program.

As mentioned, it requires intensive implementation and resources, high capacity as an agency and among partners. It begins with middle school youth and carries them through high school and was found to delay sexual initiation among young women. It has been tested with urban African American and Latino youth.

Two tribal grantees have selected Carrera and are working with Dr. Carrera regarding adaptation. If you have the capacity and the desire for such a comprehensive and long-term program, the advantage is having peer support with other grantees and lots of training and technical assistance support from Dr. Carrera’s team. It has been selected by Shingle Springs Band of Miwok Indians, the Verona Tribe and Zuni Youth Enrichment Projects.

So while this webinar is not focusing on adaptations since there are no evidence-based programs for specifically Native American youth, any program you choose will require some adaptation. Therefore, we would like to provide a brief review of adaptations and the green, yellow and red light changes.
Green light adaptation means go. It’s safe to make the change. These adaptations are appropriate and are encouraged so that program activities better fit the age, culture and content of the population. In many cases, these changes should be made because they ensure the program is current and relevant to the community. For example, if you choose only to change names and settings to better relate to Native American youth, you can do so without consulting the program developer.

Next, yellow light adaptations mean proceed with caution. Usually, they need a little bit more investigation or some information from an expert. These adaptations should be made with caution so that the core components are adhered to and the adaptations do not cause other issues like time constraints or competition with other program topics. When making yellow light adaptations, it is recommended to consult more detailed adaptation tools or an expert in that particular program before making the change.

For example, if you have videos that you believe are more culturally relevant, these should be reviewed and approved by the program developer. If you cannot connect with the developer, grantees may consider asking their trainer for recommendations. However, depending on the adaptation, it is likely that the trainer will refer you back to the developer.

And lastly, red light. Red light adaptations are those adaptations you avoid making because they may weaken the outcomes that were seen in the original research. Because these adaptations remove or alter key aspects of the program’s core components, it could be weakening the program’s effectiveness. Really, there are many evidence-based programs that you can choose from that would not require red light adaptations.

So it is simply best to avoid any that would. Thinking about what constitutes a red light adaptation as you make your selection helps clarify fit. For example, if condom demonstrations are not going to be accessible in your community, then it is best to select a program that does not require them rather than adapt one that does. Similarly, the length of a program can be challenging and should be considered when making a selection.
Now, I'm going to pose two questions, and I'd like you to share your responses in the webinar chat box, just as you would if we were all meeting in person and you were participating in a large group brainstorming activity. My first question for you is what types of changes do you foresee wanting to make to your program? So please share responses in the webinar chat box now.

Oh, and also a reminder. Please make sure that you select “Send to Everyone” so that we can all see it. And again, the question is what types of changes do you foresee wanting to make to your programs? Right above the place that you type in your answer, there’s a drop down box that says “Send To” and you can click on everyone because we really want to see your answers.

MS. MILA GARRIDO FISHBEIN: And we would like you to send the answers to everybody so all the people in the webinar can see what are some of your thoughts. We are going to wait for a couple more answers.

MS. VANESSA GEFFRARD: We’re going to wrap-up in just a couple more minutes so please take your time.

Thank you so much for these great responses and thank you for participating. Some responses included changing the videos to show Native youth, changing what we would call the overall program to make the title more acceptable to the community and adding some cultural language or images as appropriate, adding spirituality, including Native American cultural symbols, making it media-friendly. And another one that I see is also use it with non-reservation tribes that also educate non-Native students along with Native students and finding ways for the programs to be a bit more interactive by including the Native American cultural symbolism and to adapt it for non-plain tribes. Thank you so much everyone for your great answers and thank you for your participation.
So next, my second question for you is what are some elements, issues, aspects that are important for any curriculum to better fit your target populations? And again, please type your comments in the box on your right-hand side and remember to send your comments to everyone so we can all see your great responses. Again, the question is what are some elements, issues and/or aspects that are important for any curriculum to better fit your target populations? I will give you some time to write your responses down.

Again, just so everyone knows ... oh, great. I see some answers coming in. Thank you so much. Again, just to refresh, what are some elements, issues, aspects, that are important for any curriculum to better fit your target population? You can go ahead to take some time to give some great answers. Thank you.

All right. Thank you so much for your responses. Some of them included the curriculum having more than 10 sessions. Another aspect is to show that youth are valued in our community, lessons in curriculum to be delivered from that aspect, parent involvement definitely. We serve both Native and non-Native students so it would have to be something that was engaging to both groups and trying to adapt the curriculum to fit rural youth instead of the urban settings where they were evaluated.

The program should address the needs that were identified. It should have fewer sessions given the limited time given by the school. And they should have potential to change behaviors and have impact. Some other answers included positive empowering messages and again, parent engagement, community and parent engagement, length of time is a problem. Something to be included is healthy relationships and dating violence.

And some of the responses included incorporating current and former teen parents, HIV-positive individuals to communicate their real struggles, more focus on teen pregnancy prevention and healthy relationships, the images, languages, messages should resonate with the youth in the community. And lastly, making the parents know that they are very important partners in the program. Thank you again everyone for sharing your responses.
MS. MILA GARRIDO FISHBEIN: So keeping all those different elements and aspects in mind, we would like to dedicate the last section of this webinar to talk about some specific adaptations for Native American youth. And this session of the webinar will be a little bit more interactive because we would like to hear some of your thoughts about these adaptations.

So some examples of appropriate adaptations and in some cases, necessary adaptations, is to try to incorporate traditional games. Many evidence-based programs already include great games in the curriculum. We feel that some of them could very easily be adapted and incorporated into Native games. Or maybe some of the games that the programs already have are similar to some of the Native games. Probably you can change a name or maybe set it in a different way that seems something more familiar to the youth.

The talking circle. The talking circle is already a Native American practice that most programs include. Another way to approach the talking circle will be to invite traditionalists or elders of the community to do a blessing as part of the talking circle. This will be done at the beginning and at the end of the program.

The storytelling as well as incorporating music and dance and little pieces that can really make a difference in implementation of evidence-based programs. And it’s something that very easily could be done and could actually encourage the participation of the parents and make them feel that they are being part of your effort. You could invite them before you actually run the implementation of your program. And I think to share some of the customs and traditions, maybe a dance, maybe to share some of their music, to share some of their stories before you actually do the presentation or after. So they feel that you are involving them in the program.

Including culturally significant examples are really important. And we are going to talk in more detail giving you an example of how one already existing evidence-based program that wasn’t tested for Native Americans can be easily culturally adapted to better fit the needs of Native American youth.
So, as we mentioned earlier in the webinar, the program Becoming a Responsible Teen is based on the seven principles of Kwanza. This program can be adapted to address Native American principles and beliefs. For example, the seven principles probably could align very naturally with some womanhood ceremonies or maybe any other ceremony or any other principle that might be predominately among the communities that you are working with.

The seven principles are in a sense universal, and they are really broad. So those principles can be…the essence of the program can be adapted to meet those of the population that you are working with.

Another way and more simplistic adaptations could be in role-plays. A lot of the programs have role-plays and a lot of them talk about dating. Dating is a concept that can be foreign and in some cases, semi-foreign for Native American youth. It might be more appropriate to talk about hooking up.

Also, rather than referring to girlfriend or boyfriend, it’s better to indicate the person that you’re hooking up with. And one thing to remember, and this can apply to some of you, maybe not to everybody. But for some communities, it’s coming to see youth that travel with their pow wows, and they meet people when they get to a city or a town and then they hook up. And that’s the person that they hook up with.

So rather than putting the setting of the role-play in a dating situation or in a party, you can say maybe what’s in a forty-nine? I’m sure most people know that a forty-nine is a party at the end of a ritual or a celebration or a pow wow where sometimes you hook up or drink. So those little changes will make a difference in the program. It will actually resonate with the youth rather than saying a party.

I know some other programs also require field trips to clinics or to stores for the youth to have experience of how to purchase condoms or to learn how to navigate a clinical setting. This sometimes can be problematic, especially for very small communities. And sometimes they might only have one small store or a place where they can actually purchase or acquire the
condoms. And we understand that if youth goes to seek condoms, probably everybody in the community will find out. And that could be problematic.

So a way to address that, it could be to recreate a store in the classroom. So you will try to recreate it as closely as you can the store that is in that community and take the students through the process of practicing how to acquire condoms. It will require some creativity in planning for your part, but it will give the youth the option to practice.

Also, in terms of visiting the clinic, from the logistical perspective, it could be a little bit challenging at times given that it will require time out of the community or to address transportation issues. So another way to sort of address these difficulties will be to attach the visit to the clinic with a visit to the store. So you will do it sort of like a field trip where all the classes will go together to the store as well as the clinic.

Another component that we see a lot ... I'm sorry. I'm going to stop for a minute. We just got a message that some of you are having some difficulty hearing our audio. Amy, is there any way that we can address our audio difficulties?

AMY: In order for somebody to ask a question?

MS. VANESSA GEFFRARD: No, this is someone saying that the sound is kind of fuzzy.

AMY: No, not from my end, no.

MS. MILA GARRIDO FISHBEIN: Okay. So we are going to try to talk a little bit louder so we can try to mitigate some of those problems. So as I was saying, another component of some evidence-based programs is service learning. Some of the things that you could do to address the service learning component of those programs is to ask youth to develop or create a song about teen pregnancy in their community to share during a forty-niner or to share at the conclusion of the program with the community.
Another idea would be to organize events, a pow wow for teen pregnancy awareness. Or to share with the community what efforts, what programs, the youth are receiving. Then you can also run a Native ARK competition about the reality of your community and how this relates to teen pregnancy.

At this moment, I would like to open up for anybody that might have any questions or any thoughts about suggested examples for adaptations to make the programs more suitable for Native American youth.

AMY: At this time, I would like to remind everyone in order to ask a question, to please press star and the number one on their telephone keypad. We’ll pause for just a moment to compile the Q&A roster. Your first question comes from the line of Terrell White. Your line is open.

MR. TERRELL WHITE: Hi, I was trying to write it down when you were going through the list of tribes that were using different things. And I didn’t hear anybody was using BART. Are there any tribes that are currently using that?

MS. SARAH AXELTON: This is Sarah Axelton from FYSB. If I could respond to that question, is that all right Mila?

MS. VANESSA GEFFRARD: Yes.

MS. SARAH AXELTON: Okay, great. Hi, Terrell. Thanks for your question. I think one of the things that we sort of want to reiterate as a little bit of background to the question or a little bit of a side note is that as all the tribes are going through their community needs assessment, of course, there are a lot of things that are shifting and changing, a lot of decisions that are being evaluated or initially proposed curriculum that might be changed. And I think that applies to some of the ones that were shared today as well as to some of the ones that aren’t. At this point, it’s hard for you all I think to share what curriculum have been selected because a lot of grantees still have not selected curriculums.
So one of the things that FYSB will make sure to do once all of the implementation plans have been approved is to share with all of the grantees what curricula have been selected by the other tribal PREP grantees so that you all can resource and exchange ideas and have contact information for the other grantees who are implementing the same programs as you.

MS. VANESSA GEFFRARD: Thank you, Sarah.

MS. SARAH AXELTON: Sure.

AMY: There are no further questions on the phone. I turn the call back over to the presenters.

MS. VANESSA GEFFRARD: At this time, we still have plenty of time for you to ask tons of questions and receive any answers. So we would love to hear from you.

MS. MILA GARRIDO FISHBEIN: Also, if you feel more comfortable, you can send the question through the chat box. We understand that many of you still haven’t selected a program. So we would like to hear about what are some of your thoughts and impressions about some of the suggested adaptations. So what are some ideas that maybe have arisen as a result? Do we have a question for the participants, for everybody?

MS. VANESSA GEFFRARD: Has anyone used the program Native Stand, S-t-a-n-d? Is anyone using Native Stand? Okay. Another question is are there any groups implementing programs that are not evidence-based programs since PREP is a little flexible? Examples are Native Stand or the Fourth R.

MS. MILA GARRIDO FISHBEIN: Is anybody joining the call that has done Native Stand?

MS. VANESSA GEFFRARD: You can either speak or you can type it in the box.

AMY: We have a question on the line of Sarah Berkrow. Your line is open.
MS. VANESSA GEFFRARD: Hi, Sarah.

MS. SARAH BERKROW: We were just wondering because we were under the impression that our curriculums did have to be evidence-based. So Native Stand is an option even though it's not evidence-based?

MS. MILA GARRIDO FISHBEIN: Thank you for the question. We will have to refer this question back to the project officer. Sarah Axelton, do you think that you can address that question?

MS. SARAH AXELTON: Yes, thanks Mila. So the requirement in the funding opportunity announcement is that programs have to either use evidence-based curricula or substantially incorporate or use elements from evidence-based or effective programs. So if you are considering using a program that is not on the evidence-based HHS list, that is an option, but you will need to talk with your project officer about that. And they'll provide you further guidance for how you would need to demonstrate that that's an appropriate program for you to be using based on the evidence of effectiveness or the suggestion of effectiveness as well as on your community needs assessment.

MS. VANESSA GEFFRARD: Thank you.

MS. MILA GARRIDO FISHBEIN: Thanks, Sarah.

MS. SARAH AXELTON: Sure.

MS. MILA GARRIDO FISHBEIN: We have another question. Since a lot of folks have suggested parent involvement is really important. Are there specific sexual health curricula for parents? Would it be possible to have something like this all without compromising fidelity to the youth curriculum? Thank you, Tamara, for your question.
In terms of adding a component to include parent involvement, our recommendation will be to do it separate from the actual curricula. If you had implemented Program X, you will run the program with fidelity as it was written. And then as a separate component, you could do sexual health curricula for the parent. Trying to connect the two programs in a sense or maybe putting some lessons in between could compromise the fidelity of your intervention.

AMY: We have another question on the phone. It comes from the line of a participant whose information we were unable to gather. If you have asked the question, your line is open.

MS. MILA GARRIDO FISHBEIN: Thank you.

MS. VANESSA GEFFARD: Hi.

AMY: If you pressed star one to ask a question, your line is open. [no response] We have another question from Christine Markman. Your line is open.

MR. ROSS SEGAL: Hi, this is Ross Segal. Actually, I’ve hijacked Christine Markman’s telephone. I appreciate the conference call here. This is really good information about the adaptation. I was just going to throw in a little bit more about the It’s Your Game program because I was involved in the development of the program. And I appreciate your updating on the adaptation of It’s Your Game. I just wanted to let everybody know who is on the call that the original program, which is a hybrid program for use in classroom and on the computer, is available for participants if they’re interested in the original program and they can contact us if they want to pursue that further at the University of Texas.

MS. VANESSA GEFFRARD: Thank you.

MR. ROSS SEGAL: Appreciate that.

MS. MILA GARRIDO FISHBEIN: We see a couple of questions regarding the parent component. The question is if implementing something for parents separately may compromise
the fidelity of the program if conversations between parents and youth are happening because of the parent program?

I’m not really sure about that question. Some evidence-based programs already have homework where they encourage the youth to talk with their parents or their guardians or trusted adults about these issues. We will have to investigate what is the evidence in terms of having a parent program affecting the fidelity of a completely different...meaning you’re implementing program X and you are providing to the parents program B, how the effects of program B are affecting program X. So we will have to investigate that. I think probably that will be a conversation with the project officers. Our understanding is that it will not affect the fidelity of the program because you don’t have control over the environment under which the program...outside the program. So if the youth are having better conversations with the parents because of other services that are not associated with the program, that is not something that is compromised the fidelity.

When we talk about fidelity, we’re talking things that you are changing or altering in implementation of your program. For example, taking a lesson out, taking a video. I hope that sort of clarified, Tamara, your questions.

Also, we have a group that asks who was the other tribal grantee that was considering using the Carrera model? I believe Sarah replied to everybody, but Shingle Springs Band of Miwok Indians initially proposed to use the Carrera model. However, since then they have moved to evaluate other options.

We have a question from Terrell White. We have been using an internal program for a long time called Date But Wait. This isn’t evidence-based, but has shown a lot of good response from the students and parents. We are looking for an evidence-based program, however, to meet our project’s requirements. Thank you Terrell for sharing.

Certainly, our goal with this webinar was to highlight the fact that even though some of these programs might not have been tested with Native American youth, they have some
characteristics that can actually serve the population that you're working with. They might try to address the same risk behaviors, they probably address the gender that you’re working with, the age range. Maybe the setting where it was tested looked a little bit similar than your setting.

One of the things that we have to keep in mind too is that sometimes when the setting indicates rural, maybe the rural community in one state is very similar to the more urban community in another one. So we’re trying to encourage you to look now that you are going through this process, you really have your assessment data, to encourage you to look at these programs closely. We know there is no large list of programs for Native American youth. But some of the programs already out there with some tweaking and some creative adaptations can work for the populations that you’re trying to tie in.

So we would like to allow for the last two minutes for any last-minute questions, comments, impressions that you might have.

AMY: Over the phone, if you would like to leave a question or a comment, enter star and then the number one on your telephone keypad.

MS. MILA GARRIDO FISHBEIN: I know a couple of you earlier on this session asked if somebody was implementing Native Stand. We just noticed we had somebody sent us a chat indicating that San Bernardino in California is implementing Native Stand, but they are not present on the call. So if there are not any further questions, we would like to take this time to thank everybody for their active participation.

MS. VANESSA GEFFRARD: Thank you so much for participating and sharing some of your great thoughts. And if there aren’t any last-minute questions or comments.

AMY: Nothing on the phone, thank you.

MS. MILA GARRIDO FISHBEIN: Thank you, Amy. Thank you, everybody. I think this ...
MS. VANESSA GEFFRARD: ... concludes our webinar.

AMY: This concludes today’s conference call. You may now disconnect.

(END OF TRANSCRIPT)