

Summative Evaluation of REAL Essentials Research

Program proven effective through rigorous evaluation to reduce teenage pregnancy, behavioral risk factors underlying teenage pregnancy, or associated risks (specifically sexual activity or other sexual risk behaviors).

Research that demonstrated a statistically significant positive behavioral impact.

- In a quasi-experimental study of REAL Essentials delivered to 12 to 14-year olds, Rue et al. (2012) found that “Youth who received the program were 3 ½ times less likely to initiate sexual activity during the year after they received the program as compared to average behaviors from a neighboring community without the program.”
- In addition, a rigorous randomized controlled trial is underway that will examine behavioral impacts. In this study 14 Colorado high schools were randomly assigned to either receive REAL Essentials (delivered by Center for Relationship Education facilitators) or to offer curriculum as usual. Attitudes, intentions, and behaviors are being examined immediately post program and at 6- and 12-months post enrollment. Results from this study will be available in 2020. *

Published Literature:

1. Rue, L., & Weed, S. (2010). *Primary prevention of adolescent sexual risk taking: A school-based model. Adolescent and Family Health, 5(1), 1-15.*
ABSTRACT: A longitudinal study conducted on the REAL Essentials curriculum* (N=807) to determine the relative benefit of delivery by two types of teachers— public school teacher or specialist teacher. Impact on transition rates into sexual activity over 12 months was also studied. Qualitative interviews of selected cases provided depth and breadth beyond the simple yes-or-no aspect of sexual activity. Preliminary results were inconclusive regarding transition rates by teacher group. However, the program group demonstrated significant change in mediating variables related to abstinence when compared with a school not offering the curriculum. Follow-up qualitative interviews reveal parenting styles that may contribute to successful maintenance of sexual abstinence over 12 months for high school youth. The coverage of this preliminary report includes a 12-month follow-up analysis of transition rates for students.
CONCLUSION: Abstinence programs taught by both specialists and public-school health teachers demonstrated strong movement on mediating variables such as affirmation of abstinence, future orientation, and justification for sex. However, the specialist teacher achieved even stronger effects on affirmation of abstinence and justification for sex. The greater effects by the specialist teacher may be due to the shorter time span between pre and post surveys for this specialist teacher intervention (15 days instead of 9 weeks). Fidelity to the curriculum was a likely factor influencing program results.
2. Rue, L., Chandran, R., Pannu, A., Bruce, D., Singh, R., & Traxler, K. (2012). *Evaluation of an abstinence based intervention for middle school students. Journal of Family and Consumer Sciences, 104(3), 32-40.*
ABSTRACT: Outcomes associated with an abstinence education intervention were evaluated using a single group design with a 12-month longitudinal follow-up. The intervention group of adolescents ages 12–14 years (N 427) were enrolled in an 11.5-hour abstinence education intervention offered during the school day. Significant differences were found in the expected direction on proximal variables for

attitudes, intentions, and behaviors 1 year later. Youth who received the program were 3 1/2 times less likely to initiate sexual activity during the year after they received the program as compared to average behaviors from a neighboring community without the program. Abstinence based education may support youth's ability to delay sexual activity.

CONCLUSION: This evaluative evidence supports the benefit of promoting sexual abstinence to adolescents in school-based sex education sometimes offered through family and consumer sciences courses. When the curriculum is culturally relevant and matches the predominant values of most families, youth will likely be protected from the devastating consequences of early sexual debut because family values are being reinforced at the school. This is a well-known youth development strategy (Benson et al., 1998; Blum & Rinehart, 1997).

Grey Literature:

3. *Donnelly's (Education Evaluators, Inc.; 2008-2009)*

ABSTRACT: The Center for Relationship Education involved 543 youth aged 12-18 years old from various schools and communities throughout Colorado utilizing the REAL Essentials curriculum to train 6th to 12th grade students in areas of highest need in the state and where there are existing supportive partnerships. These areas included: Metro Denver, Mountain Communities, Mesa and Montrose Counties, and La Plata County. A 26-item questionnaire was administered as a pre-test before the program began and a 26-item questionnaire including all questions from the pre survey was administered at post-test. The survey instrument measured Abstinence Attitudes, Abstinence Beliefs, Behavioral Intentions, Child-Parent Communication, Healthy Relationships/Relationship Skills, Knowledge, Attitudes and Media Literacy.

CONCLUSION: Evaluation demonstrates that REAL Essentials is having an impact among participating students as demonstrated by percentage increases of statistical significance. These significant changes demonstrated from pre to post testing reflect that the curriculum is supporting youth to make healthier choices. "Clearly, REAL Essentials has met the goal of educating and supporting teen decisions to postpone sexual activity." Joseph Donnelly, Education Evaluator's Inc.

4. *Donnelly's (Education Evaluators, Inc.; 2009-2010)*

ABSTRACT: Evaluation of REAL Essentials delivered to 6th to 12th grade students. Study involved 1,845 participants between 12 and 18 years of age from various schools and communities throughout the metro Denver, Colorado area. Of these 1,845 participants, 1,097 (890 treatment and 207 control) were able to be matched from pre to post using coding protocols. From pre-test to 6-month follow-up, 519 of these youth (483 treatment and 36 control) were able to be matched using coding protocols.

CONCLUSION: Based on the results of the evaluation report, REAL Essentials is having an immediate impact (pre-test to post-test) and a sustainable impact (pre-test to 6-month follow-up) among participating students as demonstrated by percentage increases and statistical significance regarding attitudes toward abstinence, parent-child communication, behavioral intent, self-efficacy and knowledge regarding healthy relationship skills.

5. *Donnelly's (Education Evaluators, Inc.; 2009-2010) REAL Essentials Multi-State Report*

ABSTRACT: Three different agencies utilizing the same curriculum included in the analysis. A Colorado organization included 13 sites with 1217 pre- and 1095 post-surveys. Of these, 890 participants had a matching ID (initials and birth date) on the two surveys and were included in the study. A Florida organization included 8 sites with 1163 pre- and 1080 post-surveys. Of these, 895 participants had a matching ID (initials and birth date) on the two surveys and were included in the study. A Pennsylvania organization included 45 sites with 2912 pre- and 2342 post-surveys. Of these, 1607 participants had a matching ID (initials and birth date) on the two surveys and were included in the study.

CONCLUSION: Evaluation reports the effectiveness of the abstinence education programs on the seven outcome scales. Peer Self-Esteem and Positive Future had no significant change. The largest effect was found for the Beliefs in Abstinence Principles scale, with a .30 SD difference from pre to post. The other four outcomes had statistically significant gains, with effect sizes ranging from .08 to .22.

6. *Rhoades' (2016) Implementation of REAL Essentials in Center, Colorado and Drops in Teen Sexual Activity and Fertility Rates-*

ABSTRACT: Based on data collected by the State of Colorado, Saguache County has experienced a significant drop in teen births as well as in sexual activity in the past decade. This report describes ways that REAL Essentials programming in Center's middle and high schools may have contributed to these declines.

CONCLUSION: In 2005, the statewide percentage of high school students who reported they had engaged in sexual intercourse at least once in their lifetime was 39%. In Center, this figure was 63%. By 2009, this percentage had dropped in Center to 54%; statewide, it remained nearly the same at 40%. In 2013, 33.1% of Colorado high school students reported that they have had sexual intercourse at least once in their lifetime (Nickels, 2014). The same year, the Center figure had dropped to 39%.

REFERENCES: Nickels, S. (2014). Healthy Kids Colorado Survey: High school overview of 2013 data. Denver, CO: Colorado Department of Public Health and Environment.

All research was conducted by an independent evaluator who is neither part of the publishing team, nor an author of the curriculum chosen.

All reports are no older than ten years. All research included is from 2009 onward.

Qualitative Data

* Positive qualitative data was reported by educators in the program schools. Educators shared three positive observations: 1. Students who were frequently truant were present and participating in the program when the REAL Essentials speakers were presenting. 2. Students who do come to school, but frequently skip classes, were present and engaged in the REAL Essentials programming when the speaker was presenting. 3. Students who come to school, come to class but are not engaged and frequently disrupt the class were engaged and not disruptive when the REAL Essentials speaker was delivering the educational content.

The Center for Relationship Education has trained and certified hundreds of facilitators to implement REAL Essentials throughout Colorado. Colorado has the distinction of being number one in the country for high school students reporting that they are not sexually active. On the 2015 Colorado Healthy Kids Survey, 76.7% of high school students reported not having sex. This finding was reported in the [Colorado Health Foundation Report Card](https://www.coloradohealth.org/sites/default/files/documents/2016-12/2016%20COHRC%20FINAL.pdf). <https://www.coloradohealth.org/sites/default/files/documents/2016-12/2016%20COHRC%20FINAL.pdf> (see page 10) This is not causal data but could be considered correlational data open for more intense evaluation and scrutiny.

*Several evaluations were done on the WAIT Training curriculum prior to the curriculum name change to REAL Essentials. WAIT Training is no longer a curriculum and CRE is asking that only REAL Essentials be used in programming. There are a few major differences between WAIT Training and REAL Essentials.

1. REAL Essentials focuses on whole person health and is a relationship development skills-based curriculum.
2. REAL Essentials is data-driven, researched aligned and is consistently updated to ensure accuracy.
3. REAL Essentials includes trauma-informed teaching strategies.
4. REAL Essentials is designed to meet the needs of all individuals such as dignity, respect, value, support, and belonging.
5. REAL Essentials does not include gender stereotypes and is inclusive to all students.
6. REAL Essentials addresses sexual health in a stand-alone unit as an optional content area.



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Implementation of REAL Essentials in Center, Colorado and Drops in Teen Fertility Rates

PURPOSE

Based on data collected by the State of Colorado, Saguache County has experienced a significant drop in teen births as well as in sexual activity in the past decade. This report describes ways that REAL Essentials* programming in Center's middle and high schools may have contributed to these declines.

SETTING

Center is a small town in Southwestern Colorado. It is located in Saguache County, Colorado and the Center School District serves approximately 64% of the students in Saguache County (based on 2011 figures). Specifically, the Center School District enrolled 580 students in 2011, the Moffat District enrolled 206 students in 2011, and the Mountain Valley District enrolled 120 in 2011.

Center's town population in the 2012 U.S. Census was 2,271. The middle school and high school in Center share a single building and collectively served 313 6th to 12 grade students in 2015. The graduating class of 2015 included 36 students.

The median household income for Center was \$23,780 in 2012, with 27% of families falling below the poverty line. Many of the families in Center are migrant workers. The most recent mobility rate (i.e., the unduplicated count of grade 6-12 students who moved into or out of the school or district in Year 2013-2014 divided by the total number of grade 6-12 students during Year 2013-2014) was 20.7%.

The student population of Center Consolidated Schools represents those students who have traditionally had the least access to post-secondary education. The free and reduced lunch rate for the district is currently 93%. Of the student population, 91.3% are of minority status, primarily

Hispanic/Latino. Approximately 88% of students identify as potential future first generation college graduates, and 38% will be first generation high school graduates.

OVERVIEW OF PROGRAMMING

Programming that is relevant to the drop in teen fertility rates started around 2005. A number of different programs that support healthy decision-making and healthy relationship began around that time. Below, we describe these different components.

Middle School Health and Life Skills Class

The middle school health course is called Choices and is aligned to the Colorado Department of Education (CDE) Comprehensive Health Education Standards as well as the American School Counselor Association (ASCA) Student Mindset and Competencies standards. All students in grades 7th and 8th grade are required to take the course, which meets twice per week for 50 minutes for the school year. The class is focused on skill development based on the national health standards, also embedded in the CDE standards—analyzing influences, accessing information, communication skills, decision-making, goal setting, risk avoidance, and advocacy. These skills are practiced through a variety of curricula, including Botvin Life Skills, Why Try, Promoting Health Among Teens (PHAT), and REAL Essentials. Students are taught one of the levels of the Life Skills curriculum during both their 7th and 8th grade years. PHAT, REAL Essentials, and Why Try are taught on rotating years so that students receive each once during their middle school years.

High School Programming

High School students are required to take a full credit of health for graduation. The course is aligned to the CDE Comprehensive Health Education Standards for high school. The curriculum is skills-based as aligned to the national standards. Various resources are utilized in development of these standards, including Glencoe Health, Botvin Life Skills, REAL Essentials, and Scott and White's "Teens and Contraception."

All students in grades 6-12 engage in postsecondary planning called Individual Career and Academic Planning (ICAP). The ICAP process is aligned to CDE's ICAP Quality Indicators and is intended to help students develop and plan for a vision for their future. Fundamental to this process is the belief that students without a vision for their future are more likely to engage in risky behaviors and to underperform academically. Starting in about 2007, the district embraced the idea of career development programming in an effort to address the poverty challenges of the community and as a way to engage the student in a way that creates relevance for their academic education. The career development program is diverse and comprehensive. It involves intentional course selection, Career and Technical Education, college credit courses, college visits, career fairs, fiscal literacy, community engagement, work ethics education, parent education, and comprehensive career planning through advisory groups. Students meet in monthly half-day advisory groups and engage in individualized career development. This work is also paired with social-emotional learning intended to increase the skills also being taught in health courses. Monthly presenters reinforce positive skills and work to motivate students. These presenters are involved in ICAP day and then do two-hour workshops with students after school. Career development has become systemic and part of the way the school does business. Every student is expected to graduate with a post-secondary plan that involves some type of education or training. As a result, the drop out rate has decreased from 3.8 in 2006 to 2.5 in 2014. Finally, the number of students who engage in post-secondary education, career training, or military after graduation has steadily increased from 20% in 2004 to 83% in 2014.

To graduate, students are also required to take Senior Seminar, a .5 credit post-secondary prep course. The course is aligned to ASCA Mindset and Competencies and extends the work previously done through ICAP. As a part of this course, students continue to explore post-secondary options and develop a concrete plan for their future. In addition, students complete the Botvin Life Skills Transition curriculum.

Through this, students again learn about goal setting, decision making, and self-advocacy. Students are again given information and time to practice skills related to drugs and alcohol

and sex/relationship education. Students end the year with a comprehensive portfolio of their post-secondary plan.

Katrina Ruggles

The individual who has led most of this programming is Katrina Ruggles. Ms. Ruggles is a counselor by trade and started in the Center School District in 2000. She teaches middle school health, wrote the high school health curriculum, the mentoring programs, and co-wrote the district's health/wellness policy. She has spearheaded several successful grants over the years that support the programming described in this report.

Specific Sex and Relationship Education Curriculum: REAL Essentials

All students in received REAL Essentials and Promoting Health Among Teens curricula in either 7th or 8th grade through the Choices class. Students engage in skill-based instruction aligned to the national health standards as they learn the content of sex and relationship education. Parents engage in the curricula through homework assignments as well as an evening parent education event.

In addition to the classroom curricula delivery, an after-school club called STARS (Students Teaching About Relationship Success) meets weekly. A group of high school peer leaders run the program. Students must complete an application and submit a nomination letter to be a peer leader. They then are interviewed for the position. As peer leaders, the students run the Viking Navigator mentoring component to STARS, in which high school students mentor middle school students. Peer leaders also teach bi-monthly skills based classes after school to the mentor/mentee matches. The lessons are based on REAL Essentials, the Friends First STARS curriculum, and other skills-based experiential activities. In addition, they host a monthly recreation night for the mentoring matches and help run a monthly parent/family night. In the summer, the students in grades 8-12 attend the Friends First STARS National Conference as a culminating event. During the 2015 school year, 88 students engaged in the program grades 6-12.

COMPARISON DATA

Comparison with Statewide Data on Teen Fertility Rates

Between 2000 and 2009, Saguache County saw a drop in teen fertility rates (i.e., rate of births per 1,000 teens) from 53.6 among 15 to 17 year olds to 31.2 (a 41.8% decrease). During the same timeframe, Colorado saw a drop from 26.8 to 21.2 (a 20.9% decrease) in the same age range. These data are from the Maternal and Child Health Datasets (released by the Colorado Department of Public Health and Environment; <http://www.chd.dphe.state.co.us/UserControls/MCHCountyDataSets.aspx>).

Comparisons with Neighboring Counties

Table 1 compares data from Saguache to the other counties in the San Luis Valley of Colorado from 2000 to 2008 (all years that data were available).

Table 1

Teen Fertility Rates in Saguache Counties Versus Other San Luis Valley Counties

Report Year	Years Represented	County					Statewide
		Saguache	Rio Grande	Conejos	Costilla	Alamosa	(Colorado)
2004	2000-2002	53.6	25.3	28.6	37.7	31.6	26.8
2005	2001-2003	47.4	31.6	21.7	42.1	33.3	25.2
2006	2002-2004	44.1	31.6	29.5	38.8	34.3	25.0
2007	2003-2005	37.2	39.6	38.3	45.6	35.5	24.4
2008	2004-2006	32.5	38.6	35.2	37.6	38.3	24.2
2009	2005-2007	26.6	49.2	37.6	32.3	43.7	23.2
2010	2006-2008	33.6	51.7	32.5	17.9	49.7	22.3
Percent change from 2000 to 2008:		-37.3%	104.3%	13.6%	-52.5%	57.3%	-16.8%

Percent of Births to 10 to 17 Year-olds

Another way to demonstrate the decrease in teen births in Saguache County is consider the percentage of births to mothers 10 to 17 year-olds. These data are recorded and reported by the Colorado Department of Health (see http://www.chd.dphe.state.co.us/topics.aspx?q=Maternal_Child_Health_Data). In 2004 there were 6 births to mothers 10 to 17 in Saguache County, accounting for 7.3% of all births. By 2012, this figure had dropped to "1 or 2" (the standard reporting in this data set for very small numbers) and in 2013, there were no births to this age group (therefore representing none of the births in Saguache County). Statewide, the percentage of births to mothers in this age range was 3.6% in 2004 and 1.8% in 2013.

Sexual Activity

The Healthy Kids Colorado Survey is a survey conducted annually of middle and high school students. It includes variables from the Centers for Disease Control and Prevention's Youth Risk Behavior Survey. Center School District has participated in this survey since 2005. Data below reflect answers to survey questions from Center's high school students from 2005 to 2013.

Figure 2

Percentage of Center High School Students Who Have Ever Had Intercourse in Center School District by Year

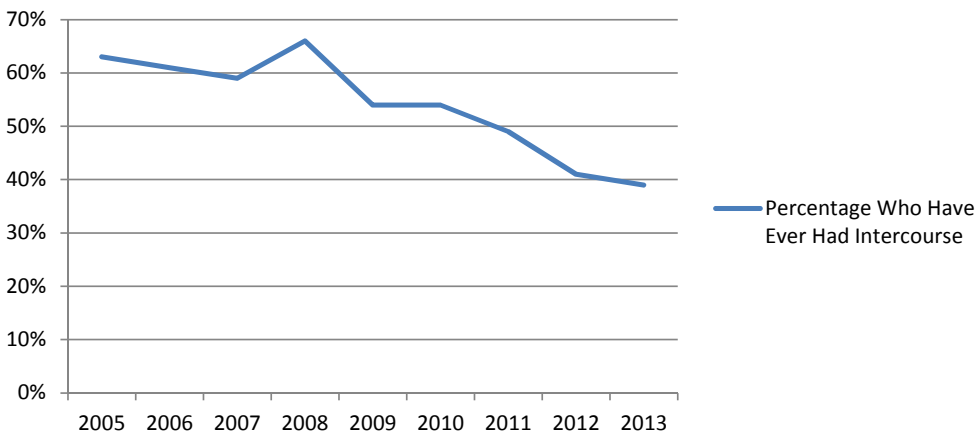


Table 2

Percentage of Center High School Students Who Have Ever Had Intercourse in Center School District by Year

Year	Percentage Who Have Ever Had Intercourse
2005	63%
2006	61%
2007	59%
2008	66%
2009	54%
2010	54%
2011	49%
2012	41%
2013	39%

In 2005, the statewide percentage of high school students who reported they had engaged in sexual intercourse at least once in their lifetime was 39%. In Center, this figure was 63%. By 2009, this percentage had dropped in Center to 54%; statewide, it remained nearly the same at 40%. In 2013, 33.1% of Colorado high school students reported that they have had sexual intercourse at least once in their lifetime (Nickels, 2014). The same year, the Center figure had dropped to 39%.

REFERENCES

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