

Student Outcomes

The 2009/2010 school year marks the fourth year of implementation of the Responsible Sexual Behavior (RSB) initiative in the Cleveland Metropolitan School District (CMSD) and the first year that school began with the majority of physical education and health teachers trained to deliver the curriculum and in a position (i.e., materials in hand) to implement the curriculum at the beginning of the school year. Through the RSB initiative, CMSD aims to provide comprehensive sexuality education to CMSD students each year from kindergarten through twelfth grade. The evidence-based curricula chosen for the initiative include *All About Life* (for grades K through 3), *Family Life and Sexual Health (F.L.A.S.H.)* (for grades 4 through 6), *Making Proud Choices!* (for grades 7 through 8), and *Safer Choices* (for grades 9 through 12). The curricula were modified so that the lessons could be taught in CMSD classrooms over a number of years. The lessons included in the RSB curricula cover a wide range of topics related to responsible sexual behavior, from good touch / bad touch and friendship in the younger grades to puberty, abstinence and STD and HIV prevention in the upper grades. RSB lessons are taught by facilitators from external agencies in grades 9 and 10 and by trained CMSD physical education and health teachers in all other grades.



A total of 19,592 CMSD students in grades K-12 received programming during the 2009/2010 school year. This number included:

- 7,044 ninth through twelfth grade students
- 2,754 seventh through eighth grade students
- 4,319 fourth through sixth grade students
- 5,475 kindergarten through third grade students

The results presented are from pre- and post-tests administered to 1,756 students from a random sample of 5 elementary (4th through 8th grades) and 8 high schools that participated in the evaluation. A summary of verbal responses from 1st through 3rd graders about what they learned is also presented.

The full evaluation report is available at www.AIDSFundingCollaborative.org.

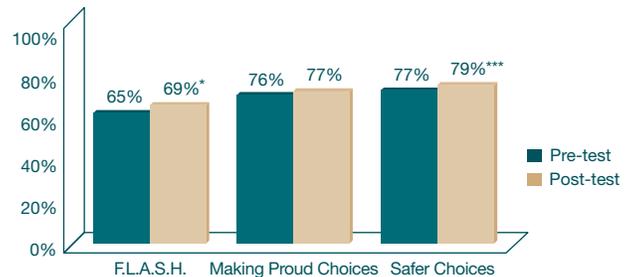
Student Outcomes

Finding 1:

Students who received the program showed positive change.

Figure 1 presents a summary of the overall changes in student knowledge, attitudes, skills and behavioral intent across the three curricula included in the outcome assessment. Students who received each of the curricula showed improvements. The improvements were statistically significant for students receiving the *F.L.A.S.H.* and *Safer Choices* curricula.

Figure 1. Percent Correct by Curriculum



*Difference is statistically significant at $p < .05$

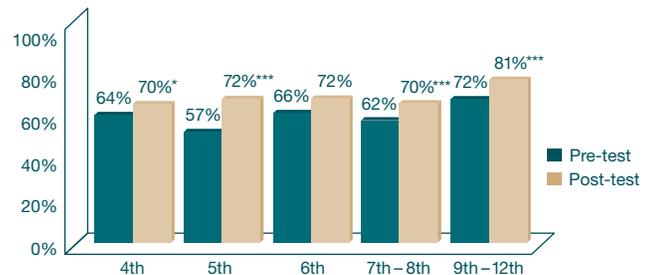
***Difference is statistically significant at $p < .001$

Finding 2:

Students in almost every grade level demonstrated significant knowledge gains.

Figure 2 summarizes students' knowledge gains by grade level. Students in each grade level who received the curricula demonstrated gains in knowledge. These changes were significant for students in grades 4 and 5 as well as grades 7 through 12. For example, by the end of the lessons:

Figure 2. Knowledge Change by Grade



*Difference is statistically significant at $p < .05$

***Difference is statistically significant at $p < .001$

- 89% of fourth graders knew that puberty is the time when a child's body begins to change into an adult's body.
- 88% of fifth graders knew that being forced to have sex is never okay.
- 86% of sixth graders and 93% of seventh and eighth graders knew that you cannot tell if someone has HIV by looking at them.
- 89% of ninth and tenth graders and 92% of eleventh and twelfth graders knew that choosing not to have sex (even if a person has had sex before) is the safest choice.

In addition, the following were the most frequent responses to the post-test question "What is the most important thing you learned?"

- Fourth graders most frequently mentioned puberty (36%).
- Fifth graders most frequently mentioned abstinence or delaying sex (31%).
- Sixth graders most frequently mentioned safe sex and/or abstinence (50%).
- Seventh and eighth graders most frequently mentioned abstinence, saying no to sex, or delaying sexual intercourse (35%).
- High school students most frequently mentioned HIV/AIDS and STDS (32%).



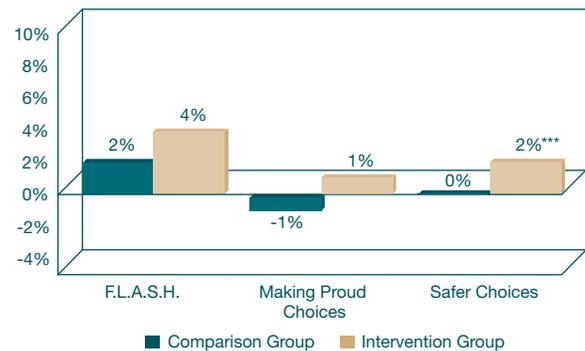


Finding 3:

Students who received the program had more favorable results than students in a similar comparison group.

For each curriculum, overall scores of students who received the intervention improved more than those for a comparison group of students that had not yet received the curricula. However, this difference was statistically significant only for participants receiving the *Safer Choices* curricula (Figure 3).

Figure 3. Improvement by Curriculum



***Difference is statistically significant at $p < .001$

Finding 4:

Students in 1st through 3rd grade most frequently reported that they learned about safety from sexual abuse.

After the final session of *All About Life*, facilitators asked 1st through 3rd grade students the question, “What have you learned in these classes?” Students most frequently mentioned good touch/bad touch and ways to stay safe. Other frequently mentioned lessons learned included feelings, family, and personal space.

Finding 5:

Students with prior exposure to the curriculum had higher knowledge pre-test scores than students with no prior exposure to the curriculum.

The RSB initiative is designed to be cumulative in nature, with students receiving RSB lessons each year. As such, students’ knowledge about responsible sexual behavior is expected to build over time. During the 2009/2010 school year, students at each grade level who had prior exposure to the curriculum had higher pre-test knowledge scores than students without prior exposure to the curriculum. Pre-test knowledge scores were significantly higher for students in 4th grade as well as 7th through 12th grades. For example:

- Fourth grade students with prior exposure to the curriculum were significantly more likely to know that you have the right to not be touched on your private parts.
- Seventh and eighth grade students with prior exposure to the curriculum were significantly more likely to know where they can go to get tested for HIV or sexually transmitted infections.
- High school students with prior exposure to the curriculum were significantly more likely to know that birth control pills do not provide protection from sexually transmitted infections.

This is one indication that students are retaining knowledge gains over time.

Student Outcomes

Finding 6:

Students with previous exposure to the RSB curriculum had higher pre-test attitude, skills, and behavioral intent scores than their peers without previous exposure to the curriculum.

Middle and high school students who were previously exposed to the curriculum began their 2009/2010 RSB lessons with more favorable scores in many instances. In particular:

- Students in grades seven through twelve with prior exposure to the RSB curriculum had significantly higher attitude scores at pre-test than did their counterparts without prior exposure to the curriculum.
 - For example, seventh and eighth grade students with prior exposure to the RSB curriculum were significantly more likely to agree that sex portrayed in the media is not always safe, healthy, or responsible.
- Students in grades seven through ten with prior exposure to the RSB curriculum had significantly higher pre-test scores related to responsible sexual behavior skills than did students without prior exposure to the curriculum.
 - For example, ninth and tenth grade students with prior exposure to the RSB curriculum were significantly more likely to agree that they can talk openly with a partner about using protection during sex.
- Students in grades nine and ten with prior exposure to the RSB curriculum had significantly higher behavioral intent pre-test scores than students without prior exposure to the curriculum.
 - For example, ninth and tenth grade students with prior exposure to the curriculum were significantly more likely to indicate that they had never had sex.

This may be one indication that students are maintaining gains associated with receiving the curriculum over time.

Finding 7:

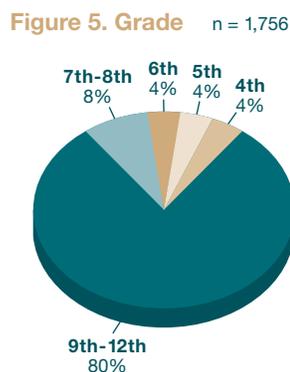
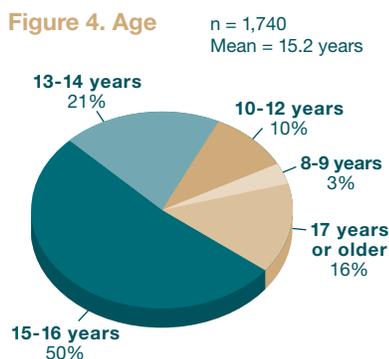
Students are having discussions with their parents about what they are learning in the RSB lessons.

Seventy three percent of parents indicated that they had had a discussion with their child about sex or a related topic like puberty or protection from sex abuse because of what their child learned during the RSB lessons.



Demographics

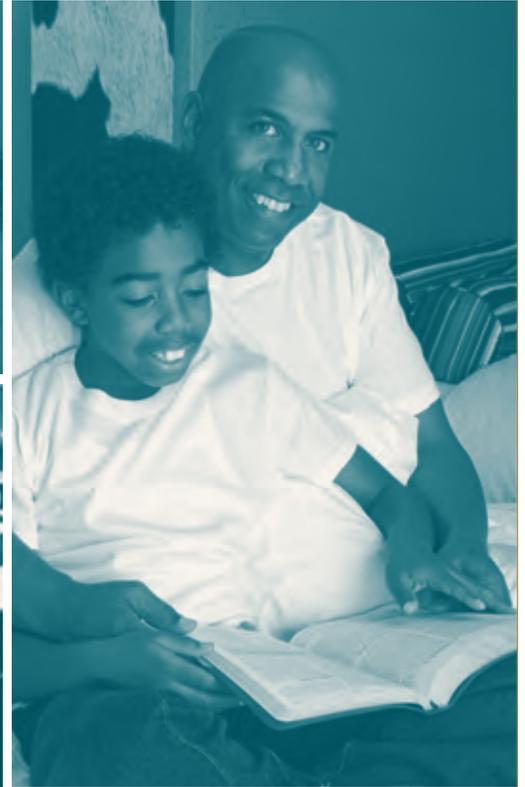
The students who participated in this evaluation had an average age of 15.2 and 80% of the students were in grades nine through twelve¹. More than half (59%) of the participants were female and 64% of them were African-American.



¹ It is of note that 64% were in grades 9 and 10 while 16% were in grades 11 and 12.



Evaluation Brief for the K-12 Responsible Sexual Behavior Education Initiative In the Cleveland Metropolitan School District | 2009-2010



Four Years of Accomplishments

The 2009/2010 school year marks the fourth year of implementation of the Responsible Sexual Behavior (RSB) initiative in the Cleveland Metropolitan School District (CMSD) and the first year that school began with the majority of physical education and health teachers trained to deliver the curriculum and in a position (i.e., materials in hand) to implement the curriculum at the beginning of the school year. Through the RSB initiative, CMSD aims to provide comprehensive sexuality education to CMSD students each year from kindergarten through twelfth grade.

This brief focuses on accomplishments of the initiative through the 2009/2010 school year. The RSB initiative has been subjected to a rigorous evaluation during each of the past four years. A look back at the progress of the initiative over this time period indicates that there have been many accomplishments as a result of undertaking this intervention. These include successes in implementing the initiative, in demonstrating change in students exposed to the curricula, and in maintaining broad support in the community.

The full evaluation report is available at www.AIDSFundingCollaborative.org.

Four Years of Accomplishments

Finding 1:

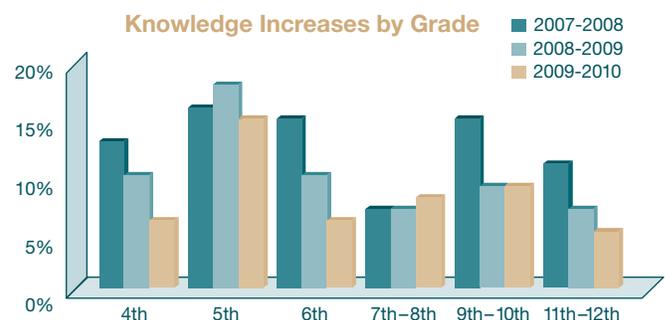
CMSD has built internal capacity, exposed thousands of students to the curriculum, and increased the sustainability of the model.

This has been demonstrated by:

- Implementing the curricula with an average of 23,624 students each year
- Training 130 teachers to implement the curricula (more than 90% of CMSD physical education and health teachers) and transitioning to a protocol in which CMSD physical education and health teachers deliver the curricula in all grades except for grades 9 and 10 so that the model is more cost-effective and sustainable over time
- Including the RSB lessons in CMSD's Scope and Sequence so that these lessons become a standard part of students' curricula each year from kindergarten to grade 12
- Responding quickly to teacher feedback about the initiative by doing such things as tailoring the content of the training to teachers' needs and providing targeted professional development to teachers

Finding 2:

Students who have been exposed to the curricula are demonstrating positive outcomes.



Evaluation of student outcomes has shown:

- Knowledge increases each year for students exposed to the RSB lessons
- Evidence that students who are exposed to the curriculum are retaining knowledge gains over time
- Evidence that some students in higher grades are maintaining attitude, skill, and behavioral intent gains over time

Finding 3:

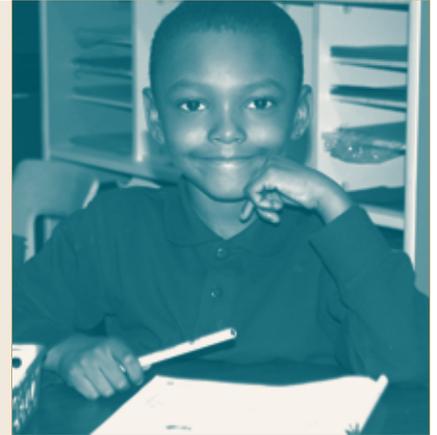
Stakeholder groups have consistently supported the RSB initiative.

Stakeholder groups have been surveyed and interviewed each year to determine their level of support for the initiative. The results consistently indicate that:

- Students express high levels of satisfaction with the initiative and, in all grades, the majority say they would recommend the lessons to their friends.
- Parents approve of the content included in the RSB lessons and believe schools should play a role in sex education.
- Teachers are comfortable presenting about the topics included in the RSB lessons and believe that the benefits of offering sexuality education outweigh the burden of interrupting class time.
- Principals are satisfied with the implementation of the RSB initiative in their schools.

What does it take to implement comprehensive sexuality education in a large urban school district?

The 2009/2010 school year marks the fourth year of implementation of the Responsible Sexual Behavior (RSB) initiative in the Cleveland Metropolitan School District (CMSD) and the first year that school began with the majority of physical education and health teachers trained to deliver the curriculum and in a position (i.e., materials in hand) to implement the curriculum at the beginning of the school year. Through the RSB initiative, CMSD and community stakeholders aim to provide comprehensive sexuality education to CMSD students each year from kindergarten through twelfth grade. In order to accomplish this, CMSD worked with community stakeholders to select four evidence-based curricula to serve as the foundation of the initiative. The chosen curricula include *All About Life* (for grades K through 3), *Family Life and Sexual Health (F.L.A.S.H.)* (for grades 4 through 6), *Making Proud Choices!* (for grades 7 through 8), and *Safer Choices* (for grades 9 through 12). The curricula were modified so that the lessons could be taught in CMSD classrooms over a number of years. Each year, students receive between five and seven lessons.



Key to CMSD and its partners' ability to implement this initiative across the school district has been their efforts to do four things:

- Monitor the community climate
- Garner broad-based stakeholder buy-in
- Create a sustainable model
- Ensure multiple year and diverse funding for the initiative

The full evaluation report is available at www.AIDSFundingCollaborative.org.

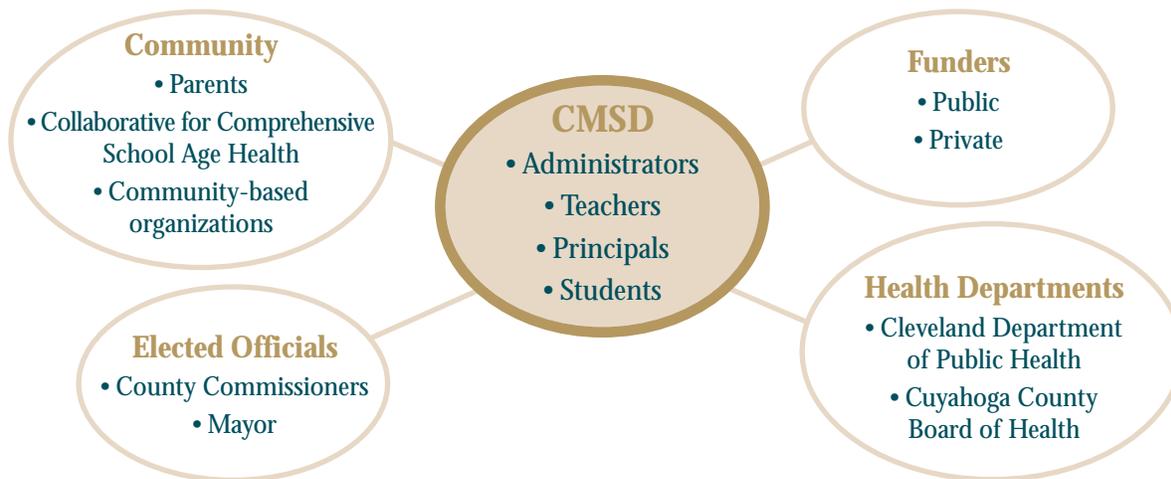
Monitor the Community Climate

Over the course of the initiative, multiple community stakeholder groups have been surveyed and interviewed in order to better understand their perceptions of and thoughts about the initiative. These stakeholder groups include parents, teachers, principals, CMSD administrators, funders, Cuyahoga County Board of Health (CCBH) staff, and members of the Mayor's staff. Engaging these stakeholders has allowed CMSD to respond promptly to feedback, clarify misperceptions as they arise, and capitalize on community resources (e.g., taking advantage of community level expertise and publicizing community resources). As a result, the initiative has responded both to CMSD's Comprehensive Health Plan as well as to community level concerns. In addition to monitoring the community climate, the initiative's partners have worked hard to keep the community informed about the progress and outcomes of the initiative by widely distributing the evaluation reports and briefs as well as taking advantage of opportunities to make presentations to a wide range of community groups about the initiative.

What Does It Take?

Garner Broad-Based Stakeholder Buy-In

Stakeholders have been involved in the RSB initiative since the planning phase (see chart below). Representatives from CMSD, CCBH, the Collaborative for Comprehensive School-Age Health, the AIDS Funding Collaborative and other community stakeholder groups worked together to select evidence based curricula for the initiative and modify them to meet the needs of the school district. In addition, several local funders, both public and private, have made financial contributions to the initiative over multiple years. This has led to a sense of collaboration and shared ownership of the initiative. Students report high levels of satisfaction with the curriculum and indicate that they would recommend it to their friends. Teachers, external facilitators, and principals have largely embraced the curriculum and see value in incorporating the lessons into the school day. Finally, parents have indicated that they have a high level of comfort with the topics addressed in the lessons and that they believe that the schools should play a role in sex education. As a result of this wide spread support, the initiative has faced very little opposition in the community.



Create a Sustainable Model

During the first year of the RSB initiative, the lessons were delivered to students in all grades by internal RSB staff and external facilitators from community agencies. In year two, students in the majority of grades received the curriculum from external facilitators as CMSD worked to train physical education and health teachers to deliver the lessons. As more teachers were trained, students in more grades began receiving the curriculum from trained CMSD physical education and health teachers. Currently, external facilitators deliver the curriculum only to students in grades 9 and 10. Using trained CMSD teachers to deliver the curricula in the majority of grades has resulted in a more cost-effective – and thus more sustainable – model for the intervention. In addition to training teachers, CMSD worked to institutionalize the initiative by including the lessons in the health and physical education Scope and Sequence, a pacing guide that outlines what content is taught to students and at what time of the year. Thus, the RSB lessons are now a standard part of students' overall school curriculum every year from kindergarten to grade 12.

Make Sure Multiple Year Funding from Diverse Funding Sources Is In Place

One of the biggest challenges for CMSD has been the need to raise money every year for the initiative. Funding for the RSB initiative has come from many sources including County TANF funds, discretionary County Health and Human Services funds, public funds administered by the city of Cleveland, and private funders, including several foundations. In order to maintain an adequate level of funding for the initiative, CMSD and its partners have moved to a more sustainable model, tapped diverse streams of funding, and responded promptly to funding opportunities. However, having a sustained commitment from diverse funders has been critically important to the initiative's success. In some cases, when funding from one source has been cut, private funders have stepped in to close the budget gaps. This has allowed CMSD time to build internal capacity by training physical education and health teachers as well as the flexibility to adapt the initiative based on feedback from stakeholders and evaluation results.