

Student Outcomes

The 2008/2009 school year marks the third year of implementation for the K-12 Responsible Sexual Behavior (RSB) Initiative in the Cleveland Metropolitan School District (CMSD). The goal of the initiative is to provide comprehensive sexuality education to all CMSD students every year from kindergarten to grade 12. Four age-appropriate evidence-based curricula were chosen specifically for this initiative. In the 2008/2009 school year, modified versions of these curricula were implemented by trained CMSD physical education and health teachers in kindergarten through 8th grade, and 11th and 12th grade, and by facilitators from contracted agencies in 9th and 10th grade. A total of 12,071 CMSD students received RSB programming during the 2008/2009 school year. This represents 30% of the students intended to receive the curriculum and reflects a longer than anticipated timeline to complete training of CMSD physical education and health teachers. (See brief on Internal Capacity Building)



The full evaluation report is available on the CMSD website at www.cmsdnet.net.

The results presented are from pre- and post-tests administered to 1,912 students from a random sample of 11 elementary (4th through 8th grades) and 10 high schools that participated in the evaluation. A summary of verbal responses from 1st through 3rd graders about what they learned is also presented.

Demographics

The students who participated in this evaluation had an average age of 14.6 and 71% of the students were in grades nine through twelve.¹ Slightly more than half (51%) of the participants were female and 56% of them were African-American.

Figure 1. Age n = 1,910
 Mean = 14.6 years

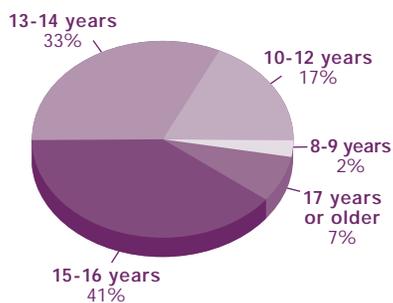
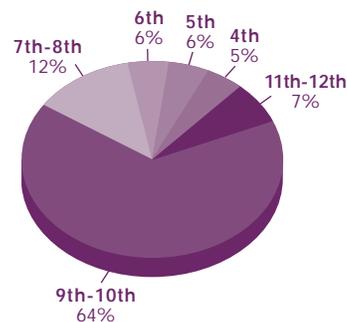


Figure 2. Grade n = 1,912



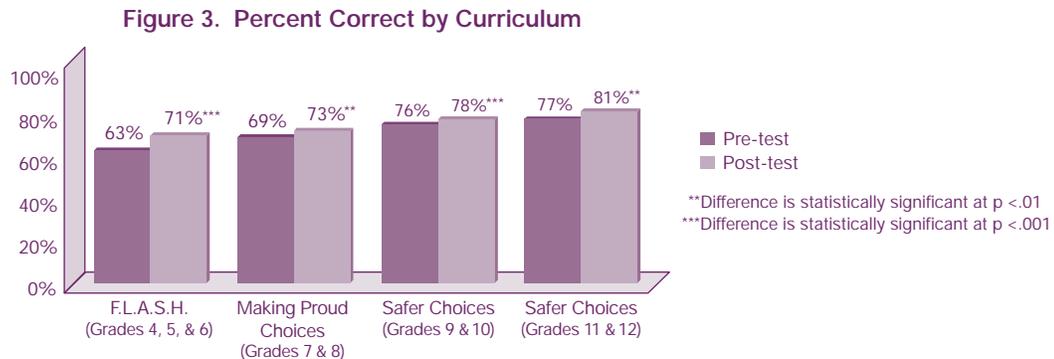
¹ It is of note that 64% were in grades 9 and 10 while 7% were in grades 11 and 12, which is reflective of the grade distributions of CMSD students who received the intervention in the 2008/2009 school year.

Student Outcomes

Finding 1:

Students who received the program showed positive change.

Figure 3 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 statistically significant improvements in these measures from pre-test to post-test.



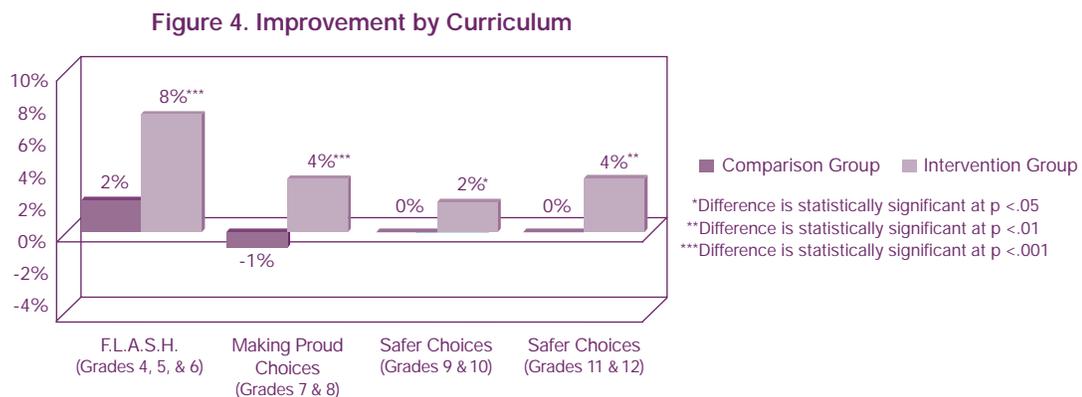
Finding 2:

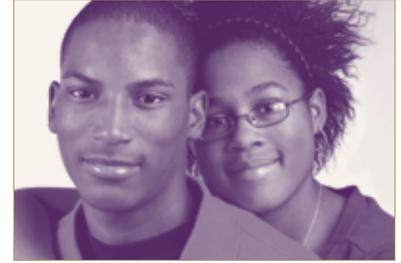
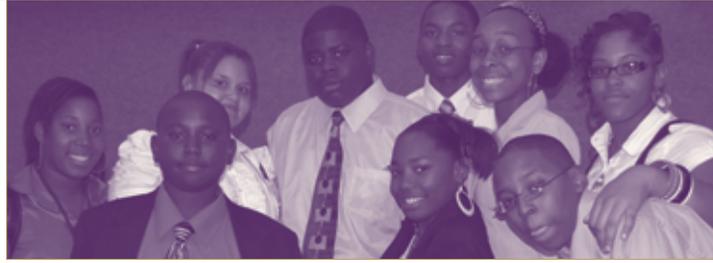
Students who received the program had more favorable results than students who did not receive the program.

For each curriculum, overall scores of students who received the RSB program improved significantly more than those for a comparison group of students that had not yet received the curricula (Figure 4).

More specifically, compared to students who had not received the program, students exposed to the curricula showed:

- Greater knowledge gains across all grade levels
- More positive change in attitudes among 6th through 8th graders
- More positive change in skills among 4th graders, 7th and 8th graders, and 11th and 12th graders
- More positive change in behavioral intent among 6th through 8th graders



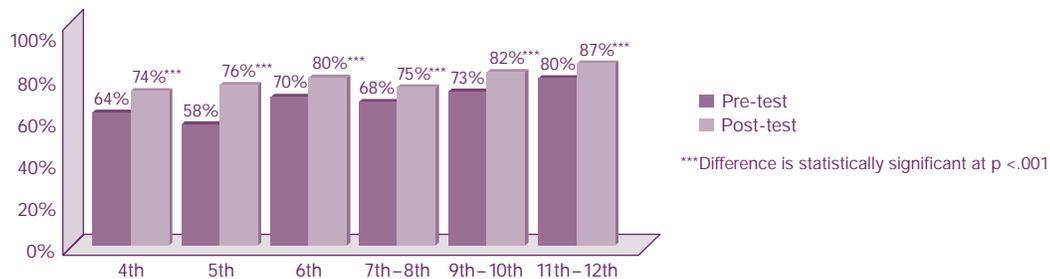


Finding 3:

Students in each grade level demonstrated significant knowledge gains.

Figure 5 summarizes students' knowledge gains by grade level. Students in each grade level who received the curricula demonstrated statistically significant gains in knowledge.

Figure 5. Knowledge Change by Grade



Finding 4:

Students in 1st through 3rd grade most frequently reported that they learned about protecting themselves 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?” In all but one of 20 classrooms students mentioned good touch/bad touch and/or not letting anyone touch their private parts. Other frequently mentioned lessons learned included:

- Family composition or differences within families
- How to relate to friends
- Being mindful of strangers
- The concept of personal space

Finding 5:

Seventh and eighth grade students as well as 11th and 12th grade students showed a significant increase in skills associated with responsible sexual behavior.

After participating in the RSB program, 7th and 8th grade students' overall scores on items related to skills associated with responsible sexual behavior moved significantly in the desired direction. They were asked whether they agreed or disagreed with the following statements:

- If I don't want to have sex with someone, I can say “no” or “stop”.
- It would be impossible for me to talk with my parent(s)/guardian(s) about sex.

After participating in the program, 11th-12th grade students were more likely to indicate that they could:

- Talk openly with a partner about using protection during sex.
- Convince a partner to use a condom even if he/she didn't want to.

Student Outcomes

Finding 6:

Sixth grade students' attitudes about responsible sexual behavior significantly improved.

At post-test sixth grade students were significantly more likely to agree or strongly agree that:

- Sex portrayed in the media (television, music, magazines) is not always safe, healthy, or responsible sex.

Finding 7:

Students in grades 4-12 indicated that they “learned a lot” from the RSB lessons, and named HIV/AIDS, STDs, abstinence or safer sex as the most important lesson learned, depending on their grade.

At least 60% of students in each grade level indicated that they “learned a lot” from the RSB lessons, and well over 90% indicated they learned “a little” or “a lot.”

How much did you learn during the FLASH, Making Proud Choices, or Safer Choices programs?
(results by curriculum)

Curriculum	Intervention Group (2008-2009)			
	N	Nothing	A little	A lot
FLASH	328	2%	22%	76%
Making Proud Choices	217	4%	36%	60%
Safer Choices (Grades 9 & 10)	1,201	6%	32%	62%
Safer Choices (Grades 11 & 12)	123	5%	34%	61%

When asked in an open-ended question to identify the most important thing they had learned:

- 30% or more of students across grades 4 through 12 mentioned HIV/AIDS and STDs.
- High school students were as likely to name abstinence as they were to name safer sex as the most important lesson learned.

Finding 8:

RSB lessons led to communication between students and parents about sexuality.

Responses to surveys administered to parents of CMSD students indicated that the RSB lessons were resulting in parent and child communication about sexuality. Among parents who reported that their children learned about sex education in the classroom:²

- 58% of parents of children in K-6 said their child asked them a question about something they learned during sex education in the classroom.
- 83% of parents of children in K-6 reported that they had a discussion with their child about sex or a related topic because of what was learned in the classroom.
- 57% of parents with children in grades 7-12 indicated that their child asked them a question about something they learned.
- 68% of these parents had a discussion with their child about sex or something they learned in the classroom.

Looking Ahead...

In June, 2009, measures were taken to include RSB lessons in the Scope and Sequence for health and physical education. CMSD's Scope and Sequence outlines a common course of study of what content is taught and at what time of the year in each grade throughout the District. The 2009/2010 school year will be the first year that CMSD will go to scale with the delivery of the RSB curricula by CMSD physical education and health teachers according to the lesson plan timing guide laid out in the Scope and Sequence. Ongoing evaluation efforts, including stakeholder perceptions, will be important in assessing efforts to institutionalize comprehensive sexuality education in CMSD.

² Opt-out consent forms were sent home to parents/guardians before the start of the RSB lessons with instructions to return them to the school if they did not want their children to participate in the curricula and/or the evaluation.

Internal Capacity Building

The 2008/2009 school year marks the third year of implementation for the K-12 Responsible Sexual Behavior (RSB) Initiative in the Cleveland Metropolitan School District (CMSD). The goal of the initiative is to provide comprehensive sexuality education to all CMSD students every year from kindergarten to grade 12. Four age-appropriate evidence-based curricula were chosen specifically for this initiative. In the 2008/2009 school year, modified versions of these curricula were implemented by trained CMSD physical education (PE) and health teachers in kindergarten through 8th grade, and 11th and 12th grade, and by facilitators from contracted agencies in 9th and 10th grade. A total of 12,071 CMSD students received RSB programming during the 2008/2009 school year.



This brief focuses on the internal capacity building that was achieved within CMSD as of the end of the 2008/2009 school year.

The full evaluation report is available on the CMSD website at www.cmsdnet.net.

Finding 1:

In spite of reduced funding for the initiative, sustainability efforts are on track.

Due to larger than expected budget cuts for the 2008/2009 school year, the original five-year sustainability plan was accelerated to complete training of CMSD PE and health teachers over the course of one school year. At the end of the 2008/2009 school year, RSB staff had trained 130 CMSD PE and health teachers to deliver the RSB curriculum. This represents more than 90% of the District's 142 CMSD PE and health teachers. Additionally, a significant number of these teachers implemented the RSB lessons to some portion of the students in their schools during the 2008/2009 school year. As a result, during the 2008/2009 school year, 4,242 students in grades K-8 and 851 high school students received the curricula from trained PE and health teachers in their school buildings.

Finding 2:

Trained internal staff increase the capacity within each school to address student needs as they arise outside of the classroom time dedicated to RSB.

As a result of teacher training efforts, by the end of the 2008/2009 school year there was at least one PE and/or health teacher trained in the RSB curriculum in nearly all of the District's schools. Efforts to build internal capacity also included education of other key staff and partners within the schools including CMSD nurses, psychologists, Academic Curriculum Team, and principals. These teachers and others are now "go to" resource people within the schools who are available for students who have questions about the subject material outside of the formal curricula delivery.

Internal Capacity Building

Finding 3:

A successful model has been established for training CMSD PE and health teachers.

On average, PE and health teachers received 10 hours of training prior to implementing the curriculum. Prior to and after training, teachers were asked to complete a survey assessing their knowledge of content directly related to the RSB lessons as well as their comfort level discussing and their perceived ability to teach topics associated with the curriculum. The average knowledge score on the test increased significantly from 73% at pre-test to 91% at post-test.

After receiving the training, teachers' *level of comfort* in discussing each of the topics listed below increased. Asterisks indicate topics for which the increase was statistically significant.

- Condom use
- Dating*
- Delaying sex*
- Female reproductive anatomy
- HIV/STD transmission*
- Male reproductive anatomy
- Puberty*
- Sexual abuse/
inappropriate touch*
- Sexual intercourse*
- Sexual orientation/
homosexuality

After the training, their *perceived ability* to teach topics associated with the curriculum increased. Asterisks indicate topics for which the increase was statistically significant.

- Dating*
- Decision making skills
- Female reproductive anatomy*
- Gender roles*
- Male reproductive anatomy*
- Pregnancy prevention*
- Prevention of HIV/STDs*
- Puberty*
- Resources in the community*
- Sexual abuse prevention*
- Sexual orientation*

On another knowledge assessment at the end of the school year, on average, teachers responded to 92% of the items correctly after having delivered the curriculum several times. This suggests that they retained the knowledge gained through the training.

Finding 4:

There is a need for ongoing training and support.

Data from focus groups and year-end surveys of a small sample of trained PE and health teachers who had delivered the RSB lessons point to some areas on which to focus ongoing professional development.¹

- Of the 25 teachers who completed the year-end surveys, five (5) indicated that they felt somewhat unprepared and one (1) felt very unprepared to deliver the lessons.
- Teachers who attended two focus groups at the end of the year indicated at least some discomfort discussing sensitive topics in mixed gender groups as well as concerns about being misinterpreted when speaking about sexual abuse to young children.
- Year-end surveys and focus groups also indicated some concerns related to RSB lessons taking time away from physical education.

Looking Ahead...

In June, 2009, measures were taken to include RSB lessons in the Scope and Sequence for health and physical education. CMSD's Scope and Sequence outlines a common course of study of what content is taught and at what time of the year in each grade throughout the District. The 2009/2010 school year will be the first year that CMSD will go to scale with the delivery of the RSB curricula by CMSD physical education and health teachers according to the lesson plan timing guide laid out in the Scope and Sequence. Ongoing evaluation efforts, including stakeholder perceptions, will be important in assessing efforts to institutionalize comprehensive sexuality education in CMSD.

¹Fewer than 20% of trained PE and health teachers responded to the year-end survey, and 11 participated in the focus groups. Therefore, opinions expressed may not be representative of the group as a whole.

Stakeholder Buy-In

The 2008/2009 school year marks the third year of implementation for the K-12 Responsible Sexual Behavior (RSB) Initiative in the Cleveland Metropolitan School District (CMSD). The goal of the initiative is to provide comprehensive sexuality education to all CMSD students every year from kindergarten to grade 12. Four age-appropriate evidence-based curricula were chosen specifically for this initiative. In the 2008/2009 school year, modified versions of these curricula were implemented by trained CMSD physical education (PE) and health teachers in kindergarten through 8th grade, and 11th and 12th grade, and by facilitators from contracted agencies in 9th and 10th grade.



This brief focuses on support for and assessment of the initiative by stakeholders and uses data gathered through surveys of parents, principals, and classroom teachers, focus groups and surveys of trained PE and health teachers, and interviews with CMSD and Cuyahoga County Board of Health (CCBH) staff.¹

The full evaluation report is available on the CMSD website at www.cmsdnet.net.

Finding 1:

Parents hold positive views about the RSB initiative.

Nearly all (98%) of surveyed parents of students in grades K-6 believed that it was somewhat (18%) or very (80%) important for schools to be involved in sex education. Among parents with students in grades 7-12, 96% indicated that it was somewhat (15%) or very (81%) important for schools to be involved in sex education.

In addition, more than 80% of parents of children in grades K-6 believe that their children should receive information about all of the topics included in the lessons for those grades. These include:

- Families and gender roles
- Respect for body/self
- STD and HIV/AIDS prevention
- Healthy relationships
- Sexual abuse prevention
- Resisting peer pressure
- Sexual growth and development

More than 85% of parents of children in grades 7-12 believe that their children should receive information about each of the topics included in the lessons for those grades. These include:

- Avoidance of high risk sexual behaviors
- Families and gender roles
- Healthy relationships
- Pregnancy prevention
- Proper use of condoms and other types of birth control
- STD and HIV/AIDS prevention
- Sexual growth and development

¹ Although interviews with funders of the RSB initiative were not included in the evaluation, a strong measure of community commitment to the RSB initiative is its wide range of public and private funders, including Cuyahoga County Board of County Commissioners, the City of Cleveland, the Cleveland Foundation, AIDS Funding Collaborative, and the George Gund Foundation. These funders have provided leadership and support since the K-12 RSB initiative was developed.

Stakeholder Buy-In

Finding 2:

The RSB initiative has a high level of support from PE and health teachers, even while they express concern about the lessons taking away time from physical education.

When asked immediately after their training, 83% of trained PE and health teachers agreed or strongly agreed that the benefits of the RSB initiative outweighed the burdens of interrupting class time and 93% agreed or strongly agreed that the RSB initiative should continue to be incorporated into the classroom.

At year end, focus groups and surveys of a small number of trained PE and health teachers who had delivered the RSB curricula confirmed their ongoing belief in the importance of the RSB initiative. They also pointed to some challenges associated with incorporating the curricula into their classes, possibly indicating some areas where ongoing support and encouragement for their role in delivering the RSB lessons can be directed.²

Finding 3:

Classroom teachers gave universally high marks to the RSB facilitators and to the RSB curricula.

99% of classroom teachers agreed or strongly agreed that the benefits of the RSB initiative outweighed the burdens of interrupting class time and that the RSB initiative should continue to be incorporated into the classroom.³ The vast majority of the classroom teachers who were surveyed either agreed or strongly agreed that:

- The facilitator appeared comfortable presenting the curriculum (100%)
- Students seemed to be attentive and interested during the sessions (97%)
- The facilitator provided answers to all of the students' questions (100%)
- The material was age-appropriate for the students in my classroom (100%)

Finding 4:

CMSD administrators and principals expressed support for the initiative, while acknowledging the need for continuing communication.

Most (89%) principals reported that they have been satisfied (73%) or very satisfied (16%) with the implementation of the RSB curricula at their school, and 68% of principals believed that the RSB lessons were a good use of students' class time. When presented with a list of specific topics covered in the RSB lessons, more than 85% of principals approved of most of the topics.

CMSD administrators who were interviewed as part of the evaluation indicated that they are supportive of the RSB initiative. However, they acknowledged that there is work to be done in making sure that all relevant members of their organizations maintain a high level of knowledge and awareness of the initiative.

"Administrators in the Chief Academic Office and within the Academics Division are extremely supportive. I think overall people at that level agree that comprehensive sex education belongs in schools. But as far as gauging their level of commitment or how highly they're committed or what they'd be willing to do or if they'd be willing to speak on our behalf and advocate for us if necessary... I don't think they have quite enough information or involvement at this point to really get behind it and push."

Looking Ahead...

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³When external facilitators delivered the RSB curriculum, classroom teachers were required to remain in their classrooms. In instances when internal PE and health teachers were delivering the curricula, a classroom teacher may or may not have been present. 93% of surveys were completed by teachers in 9th and 10th grade classrooms in which the RSB curriculum was delivered by external facilitators; 7% of the surveys did not indicate a grade level.