

Evaluation Abstract: Be Yourself/Sé Tú Mismo in Maryland

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Intervention Name	<i>Be Yourself/Sé Tú Mismo</i>
Intervention Description	<i>Be Yourself/Sé Tú Mismo</i> is an after-school teen pregnancy prevention program using a cultural, developmental, and theory-based curriculum. It has four core components: (1) curriculum-based group sessions, (2) social media and text messaging as reminders and reinforcements, (3) a weekend retreat, and (4) Individual Level Interventions/individual action plans and case management services. This is a 12-week program with sessions occurring twice weekly for 1.5 hours per session (25 program sessions for cohort 1 and 19 program sessions for cohorts 2-6), and a weekend retreat from Friday after-school to Sunday mid-day (48 hours).
Counterfactual	<i>Healthy Living/Vida Sana</i>
Counterfactual Description	<i>Healthy Living/Vida Sana</i> is an attention-control program that focuses on nonsexual health-related topics, such as fitness, nutrition, and exercise. It has 3 core components: (1) group meeting sessions, (2) case management services, and (3) a weekend activity. This is a 12-week program, with groups meeting twice weekly for 1.5 hours for the first four sessions and once a week for the remaining eight sessions (12 total program sessions). The weekend activity is a one-day activity such as roller skating, bowling, or attending amusement parks.
Primary Research Question(s)	What is the impact of <i>Be Yourself/Sé Tú Mismo</i> compared to <i>Healthy Living/Vida Sana</i> on sexual debut six months after the program ends? What is the impact of <i>Be Yourself/Sé Tú Mismo</i> compared to <i>Healthy Living/Vida Sana</i> on contraceptive use at last sex six months after the program ends? What is the impact of <i>Be Yourself/Sé Tú Mismo</i> compared to <i>Healthy Living/Vida Sana</i> on contraceptive use in the last three months, six months after the program ends?

Sample

The population of interest was 9th- and 10th-grade self-identifying Latino students from 12 schools in Montgomery or Prince George's Counties, Maryland. High schools were eligible if they had (1) a high percentage of Hispanic/Latino populations and (2) a high percentage of students receiving free or reduced-price meals. Twelve eligible schools were recruited and all consented to participate. There were a total of six cohorts during the project (72 clusters).

Both male and female youth were eligible for the program if they met the following eligibility requirements:

- Attended 9th or 10th grade in one of the study site high schools
- Self-identified as Latino/a
- Spoke and/or understood Spanish (intervention components were delivered in Spanish)
- Were able to participate in one weekend activity
- Were able to attend two sessions per week on the days specified
- Were not pregnant at time of enrollment
- Returned the completed application packet
- Had not participated in a previous *Be Yourself/Sé Tú Mismo* or *Healthy Living/Vida Sana* program through Identity or Mary's Center

Youth must have volunteered to participate in the program. Enrolled youth completed an application packet, including both parental consent and youth assent, and attended at least one neutral session before randomization. The final enrolled sample size was 1,356.

Setting

All 12 schools participating in this study were in Montgomery or Prince George's Counties, Maryland.

Research Design	<p>This is a cluster randomized trial. For all cohorts, except cohort 1, schools were informed of their assignment to intervention or comparison <i>after</i> parental consent and baseline survey data were collected. For cohort 1, school assignment was shared with the project director and program manager prior to the completion of recruitment. Beginning with cohort 2, program sessions were modified to include four neutral sessions (identical for intervention and comparison schools) during the first two weeks of implementation. During this time, program staff continued to recruit youth for the program, which provided staff time to meet recruitment expectations while maintaining blind recruitment. Consent forms did not indicate the schools' intervention status, and program staff were not aware of which school would receive which condition during recruitment. Randomization was shared with the program manager and program director on the last day of recruitment/neutral sessions. The program manager then assigned staff to schools to begin program implementation the following week. Youth Development Counselors were assigned to <i>Be Yourself/Sé Tú Mismo</i> schools, and Healthy Living Mentors were assigned to <i>Healthy Living/Vida Sana</i> schools. Youth were not allowed to enroll after random assignment results were shared.</p> <p>The unit of random assignment was the school. Randomization for all cohorts was completed before cohort 1; cohort results were revealed on the last day of recruitment/neutral sessions for each cohort. Matched pairs were used to cluster schools. Schools were paired together during evaluation planning and the pairs remained throughout the evaluation. Schools were matched based on these characteristics: (1) percentage of students who were Hispanic/Latino, (2) teen birth rate in school zip code, (3) miles from partner organization (Montgomery County schools only), and (4) school enrollment.</p> <p>Data was collected at four time points: baseline, immediate post-program, 6 months post-program and 12 months post-program (12-month data not analyzed for this report).</p>
Impact Findings	There is no evidence that <i>Be Yourself/ Sé Tú Mismo</i> impacted any of the outcomes.
Implementation Findings	<p>For both the primary and secondary analytic samples, all intended sessions were offered; 41.2% of intervention youth and 32.7% of comparison youth attended more than 75% of the sessions. Intervention youth reported significantly higher interest, engagement, and satisfaction scores compared to comparison youth.</p>
Schedule/Time Line	Sample enrollment and baseline data collection were completed in February 2014. The final cohort completed the immediate post-program follow-up in June 2014 and the 6-month post-program follow-up in December 2014.
