Making Proud Choices!
An Evidence-Based Teen Pregnancy Prevention Program

Project background
Investing resources in evidence-based programs that reduce teen pregnancies and sexually transmitted infections (STIs) and improve teen health outcomes is a priority for state and local leaders across the country. In support of this need, the U.S. Department of Health and Human Services directs a systematic review of research related to teen pregnancy prevention. The purpose of this review is to identify programs that improve knowledge about STIs and effective methods of contraception, reduce risky sexual behavior, and prevent teen pregnancies or STIs. Through the Office of Populations Affairs (OPA), the U.S. Department of Health and Human Services has also prioritized generating new evidence on popular programs.

This brief highlights findings from OPA’s evaluation of a commonly used teen pregnancy prevention program, Making Proud Choices! (MPC).

The study of MPC, which was conducted by Mathematica, began in 2017 and lasted three years. The study assessed the impact of the program on risk and protective factors that can lead to changes in longer-term sexual risk behaviors. The evaluation used a randomized controlled trial to assess MPC’s effectiveness, with high schools randomly assigned to MPC implemented by trained health educators or to business-as-usual programming. The evaluation focused on assessing the impact of MPC on youth who were at especially high risk for pregnancy and STIs.

Making Proud Choices! What is it?
Implemented in many school-based settings nationwide over the past decade, MPC is a popular teen pregnancy prevention program that intends to provide youth with the information and tools they need to reduce their risk of STIs, HIV, and pregnancy. It emphasizes abstinence as the safest choice for avoiding pregnancy and STIs but also encourages youth to use condoms and other methods of birth control if they choose to have sex. The program includes video clips, youth role-playing activities, and group discussions.

Study design
Despite MPC’s popularity, the program had not been rigorously evaluated since one initial study in 1998. For the current evaluation, Mathematica used a randomized controlled trial design to assess MPC’s effectiveness. We compared data from a baseline survey administered before programming began and compared that with data from a follow-up survey administered about six months after the end of programming. Altogether, the study included more than 2,800 youth. High schools within selected cities were randomly assigned to receive the MPC program or receive business-as-usual programming.

Average age of youth who participated in the study

- 15.6
- 46% male
- 53% female
- 80% Black
- 4% Hispanic or Latino

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MPC improved outcomes across nearly all risk and protective factors

The evaluation showed that MPC had statistically significant and favorable impacts on 9 of 10 risk and protective factors examined approximately 6 months after the program ended. The MPC program significantly improved knowledge of HIV/STIs, pregnancy, condoms, and other contraceptives; attitudes and beliefs about condoms; and self-efficacy in using condoms, negotiating condom use, and refusing sex.

### Statistically significant MPC impacts

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<thead>
<tr>
<th>Knowledgeable about HIV</th>
<th>Knowledgeable about pregnancy</th>
<th>Knowledgeable about condoms</th>
<th>Knowledgeable about other forms of contraception</th>
<th>Believes condoms can be pleasurable</th>
<th>Believes condoms are important and easy to use</th>
<th>Reports can use condoms effectively</th>
<th>Reports can negotiate condom use</th>
<th>Reports can refuse sex</th>
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<tbody>
<tr>
<td>Control mean percentage</td>
<td>42</td>
<td>51</td>
<td>58</td>
<td>41</td>
<td>16</td>
<td>18</td>
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<td>70</td>
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<td>MPC mean percentage</td>
<td>53</td>
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<td>Outcome</td>
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</table>

### MPC improved a notable risky behavior

Because MPC aimed to reduce risky sexual behavior in addition to improve sexual health among youth, the evaluation also examined the program’s effects on risk behaviors. Six months after the end of the program, youth assigned to the MPC group reported significantly fewer episodes of sex compared with those in the business-as-usual group. This is particularly important because the study occurred in 15 schools across four cities where the teen birth rate or STI rate was markedly higher than the national average.

### Next steps

MPC showed consistently favorable and statistically significant impacts on key outcomes and holds promise for producing favorable changes in sexual behaviors among teens. Some findings, however, might require additional study. In particular, it is important to understand the longer-term effectiveness of the program on behavior and health outcomes, which the current study did not measure. Even in the short term, the study provides evidence of a reduction sexual risk behaviors and improvement in factors that prevent against risk of sexual activity for teens.

The Office of Population Affairs commissioned Mathematica and its subcontractors, Decision Information Resources and the Healthy Teen Network, to conduct a rigorous national evaluation of MPC. Read the full report here.