

Reducing the Risk

Summary of Core Components



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Published by ETR
Scotts Valley, CA 95066-3248

Title No. C016

Summary of Core Components

Core components are important parts of a program that should be implemented for that program to be effective. They may involve the implementation of the program, including the audience and setting, the implementation schedule, the program leaders and preparation. Core components also include the content of the program activities and the teaching methods (pedagogy) used to cover that content.

This is a summary of the core components in *Reducing the Risk*.

IMPLEMENTATION

Audience and Setting

- ◆ Ideally *Reducing the Risk* should be implemented in school settings.
- ◆ The curriculum is designed for students in the 9th grade, but can be implemented with students who are in other appropriate grades (i.e., grades 8–12) or the appropriate age (i.e., 13–18).

Implementation Schedule

- ◆ Ideally, classes should be taught 2–3 times per week.
- ◆ The classes should be taught so that most youth attend most classes.
- ◆ All 16 classes should be taught. (Note: If teaching both Class 1A and Class 1B, the total number of classes will be 17. At least one of the Class 1 options must be taught.)
- ◆ All classes should be taught in sequence.
- ◆ Classes should last at least 45 minutes.
- ◆ The ideal class size is between 10 and 30 youth.

Program Leaders

- ◆ Educators for the *Reducing the Risk* curriculum should be familiar with the *Reducing the Risk* content, comfortable discussing the material, and experienced in teaching a skills-based program.

Preparation

- ◆ If the curriculum is implemented in a school setting, appropriate approval should be obtained from the school and parents. If implemented in a non-school setting, appropriate approval should be obtained from the host organization and parents, and steps necessary to successfully recruit youth should be implemented.
- ◆ The educators should be adequately trained and experienced in order to teach the content, to implement the interactive activities, to lead roleplays and to discuss the sexual topics comfortably.

The following topics should be covered:

- ◆ Knowledge of pregnancy risk and prevention.
- ◆ Knowledge about STI and HIV risk, prevention, transmission, treatment and consequences.
- ◆ Perception of individual risk for pregnancy, STI and HIV and their consequences if teenagers engage in unprotected sex.
- ◆ Knowledge of how to be abstinent or use birth control methods effectively and how to access health care information and contraception (including condoms).
- ◆ Effective and ineffective refusal skills and delaying tactics.
- ◆ Social and peer norms, as well as personal attitudes, about abstinence, sex, unprotected sex, condoms and contraception.
- ◆ Self-efficacy and refusal, delay and communication skills in pressure situations in order to avoid pregnancy and STI.
- ◆ Self-efficacy and skills to obtain health care information and contraception from a clinic and use it.
- ◆ Skills to communicate with parents or other adults about teen sexual activity and birth control.

All the activities should be implemented as designed, using the teaching strategies specified. In terms of pedagogy, this means that educators:

- ◆ Create a safe and effective learning environment in the classroom by establishing group agreements and including mechanisms for asking sensitive questions and actively involving participants.
- ◆ Teach all activities in sequence within each lesson.
- ◆ Implement all activities using the interactive strategies included in the lessons, as these teaching strategies and activities were designed to influence the theory-based risk and protective factors related to sexual risk behaviors.
- ◆ Implement all role-playing activities so that all skills are explained and modeled and participants repeatedly practice those skills.
- ◆ State messages about important values and sexual behaviors that are stated clearly and emphasized repeatedly. The key message is that the only responsible alternatives for teenagers are to abstain from sexual activity or to use condoms or other forms of contraception.