



## SUPPORTING YOUTH TO MAXIMIZE THEIR STRENGTHS, IMAGINE A HEALTHY FUTURE

### AND EXPLORE THEIR IDENTITIES

#### RE:MIX IS A COMPREHENSIVE, INCLUSIVE HEALTH EDUCATION PROGRAM

that includes age-appropriate, medically accurate information on topics related to human development, healthy and gender equitable relationships, decision making, contraception, and STI prevention. Re:MIX aims to empower and educate adolescents (ages 13-17) and young parents (ages 18-24) with opportunities to learn and practice the crucial skills youth need to make responsible life decisions. Designed with youth, for youth, Re:MIX emphasizes the stories of peer educators and encourages students to explore their values.

#### Curriculum

This science-based, evidence-informed curriculum incorporates game-based tools, technology, and storytelling co-delivered by a professional health educator and a peer educator, who is also a young parent.

#### Peer Educator Professional Development and Leadership

Peer educators learn about sexual and reproductive health and develop facilitation and classroom management skills. They receive training, mentoring, and skills practice opportunities that support their professional and leadership development.

#### Community Health Service Linkages

Re:MIX connects participating adolescents and peer educators to inclusive, youth-friendly community health services that welcome all, including LGBTQ+ (lesbian, gay, bisexual, trans, queer/questioning, and other identities).

## THE POWER OF PEER LEARNING

#### RE:MIX EMPLOYS YOUNG PARENTS AS PEER EDUCATORS

to co-facilitate the curriculum with health educators. While health educators bring critical expertise, the peer educators better understand the complex challenges the students face and are able to relate to and engage students in meaningful discussions. During the program, peer educators gain new skills and build professional competencies that will benefit their future careers. Through ongoing assessment and quality improvement efforts, the Re:MIX program offers best practices related to the power of peer learning, including:

#### The co-facilitation model proved

**effective:** School officials and teachers cited the benefit of having educators, who are sexual health experts, partner with peer educators, who can relate to students by sharing their experiences as young parents.

#### Peer educators benefited from their

**participation:** Peer educators learned about sexual and reproductive health, gained presentation and facilitation skills, and benefited from networking opportunities to secure future jobs.



#### Students responded to the storytelling

**approach:** Peer educators engaged students by sharing their experiences as young parents and encouraging students to share their own stories.

#### Lessons learned for using the peer educator approach include ensuring:

- ✓ Ongoing support for peer educators
- ✓ Opportunities for peer educators to serve as **leaders and mentors** to their peers
- ✓ Adequate time for professional development
- ✓ Targeted training on classroom management and facilitation



## REACH AND IMPACT

**THE EFFICACY OF THE RE:MIX CURRICULUM WILL CONTINUE TO BE EVALUATED** until the project ends in June 2020. Final data includes the following:

### REACH

- 3 schools
- 57 classes
- 626 students

### DEMOGRAPHICS

- 71% of students are Latinx
- 29% of participants are children of teen mothers
- 41% speak primarily Spanish at home
- 53% speak primarily English at home

### IMPACT

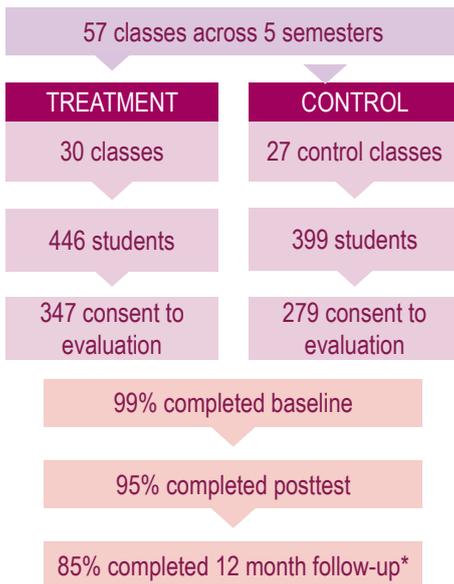
The evaluation study found promising short-term impacts on intentions, knowledge, and self-efficacy. The study did not find impacts on attitudes about gender roles, early sex, contraception, or pregnancy.

Re:MIX students were...	Re:MIX	VS. CONTROL
• More likely to report that they would definitely use hormonal or long-acting contraceptives if they have sex	61%	52%
• More likely to have accurate knowledge about:		
• Condoms	73%	52%
• STI prevention	62%	43%
• Contraceptive efficacy	31%	13%
• More likely to report they know where to obtain contraception	43%	18%
• More confident in their ability to request and provide consent	30%	22%

## EVALUATING RE:MIX

**RE:MIX USES A CLUSTER-LEVEL RANDOMIZED CONTROLLED TRIAL RESEARCH DESIGN TO EVALUATE SUCCESS.** Students and parents provided written consent to participate in the evaluation. The study team then randomized classes to treatment and control groups.

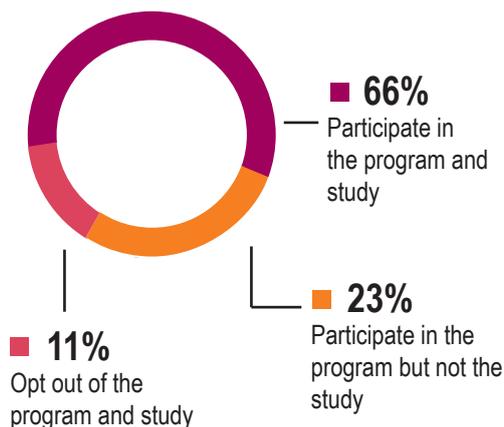
### PARTICIPANT FLOW



\*Response rates based on classes enrolled through the Spring 2018 cohort

### STUDY RECRUITMENT & CONSENT

During the evaluation period, 88% of students returned consent forms - youth chose to:



## CURRICULUM SESSIONS

### SESSION 1

#### Introducing Re:MIX

Introduces the curriculum and the storytelling approach.

### SESSION 2

#### Getting the Gender Message

Discusses, questions, and redefines gender norms collectively.

### SESSION 3

#### Understanding Relationships

Builds participants' skills to identify healthy and unhealthy relationships.

### SESSION 4

#### That's What I'm Talking About!

Explores strategies for youth to communicate effectively and safely.

### SESSION 5

#### Consent and Setting Limits

Defines individual sexual rights and responsibilities, while youth practice communicating consent.

### SESSION 6

#### Becoming an Adult

Explains adolescent development and the reproductive process.

### SESSION 7

#### Condoms and Contraception

Teaches youth about accessible and effective contraception methods.

### SESSION 8

#### The Final Stage

Discusses facts about sexually transmitted infections and how to make safe sexual health decisions.

### SESSION 9

#### A Baby Today

Explains the financial implications of childrearing through games and storytelling.

### SESSION 10

#### Commitment to the Future

Encourages youth to envision their ideal futures and identify goals that will empower them to lead healthy lives.

