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
The efficacy of the Re:MIX curriculum was evaluated across 5 semesters from Fall 2016 through Fall 2018. 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**
Positive impacts were predominantly sustained at the 12-month follow-up. Given the small number of sexually active students, evaluators were unable to detect statistically significant impacts on unprotected sex.

When assessing sexual & reproductive health knowledge, Re:MIX students correctly answered a significantly higher percentage of questions.

- Condoms 73% (52% control)
- STI Prevention 62% (43% control)
- Contraception Efficacy 31% (13% control)

*This impact no longer met statistical significance after 12 month follow-up.*

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**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.

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**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**

57 classes across 5 semesters

- **TREATMENT**
  - 30 classes
  - 446 students
  - 347 consent to evaluation
  - 99% completed baseline
  - 95% completed posttest
  - 85% completed 12 month follow-up*

- **CONTROL**
  - 27 control classes
  - 399 students
  - 279 consent to evaluation

**STUDY RECRUITMENT & CONSENT**

Out of all potential participants, youth chose to:

- **66%** Participate in the program and study
- **23%** Participate in the program but not the study
- **11%** Opt out of the program and study

Out of all potential participants, 88% returned consent forms. Those who did not return consent forms participated in the program but not the study.

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