## **Early Findings and Next Steps**







Bill Lambert and Megan Skye



#### Since our last call...

#### We have emailed each site:

- 1. A report combining the pre- post- data for all of your youth
- 2. A report for all sites and all youth combined
  - You can compare your findings to those from the entire Native STAND Nation.
- 3. A list of key findings from the study what we know to date



#### **Outline**

#### 1. Major Findings

- Barriers and facilitating factors in program delivery
- Our Youth as they started Native STAND
- Our Youth as they finished Native STAND
- 2. Next Steps for Us
  - Move Native STAND into Healthy Native Youth
  - Update and enhance -> "Native STAND 2.0"
- 3. What does this mean for you?



# Major findings

Barriers and facilitating factors in program delivery

## **Geographical Reach of Native STAND**





#### **Getting Native STAND Up and Running**

- 31 sites (65%) were able to implement within the 1st year following training.
- An additional 12 sites (23%) implemented in their 2nd or 3rd year.
- 4 sites (8%) implemented only in the first year and chose not to continue.



#### Quotes from Educators

"I got feedback from a young man's parents, and the dad was indicating that [Native STAND] made it easier to talk to him about the different STDs, and about relationships, because of what we've been implementing." — Nichole Gonzales

"[Native STAND youth] are even being role models and mentors for their younger siblings and cousins -- they look up to them." — Donna Quintana

"It's just amazing, the conversations that these youth are having...they're really not scared to talk about it. They just need a place to do it." — Robby Bill



#### Barriers to implementing

- Site logistics, including space and scheduling issues (38%)
- Changes in primary educator (36%)
- Organizational changes leadership, stability, or capacity (31%)
- Changes in other key staff (27%)

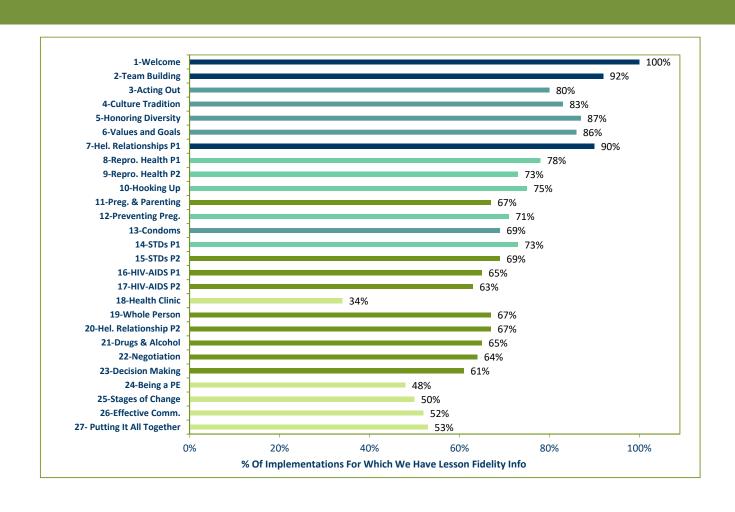


#### Facilitators of implementing

- Native STAND Project Staff (47%)
- Providing incentives for students (40%)
- Sharing resources and knowledge with other educators (36%)
- Sharing the educator role with another (33%)
- XX of the 43 sites which implemented (XX%) have reported continuing with Native STAND in some form.

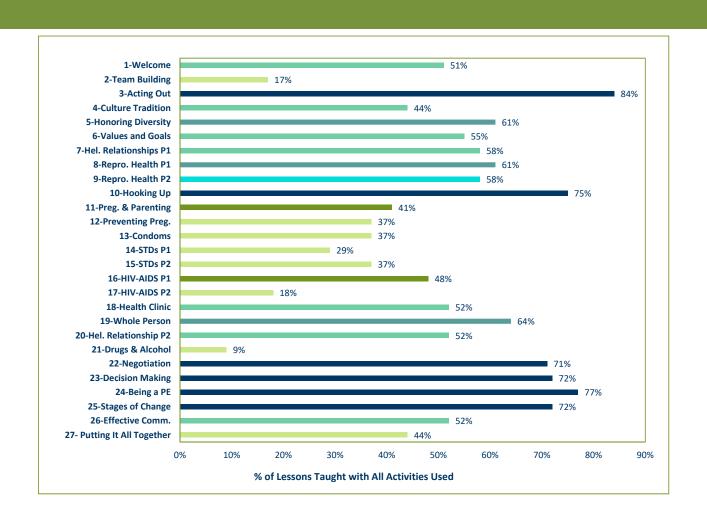


#### What Units Were Taught?





#### Lessons taught By the Book vs. Not

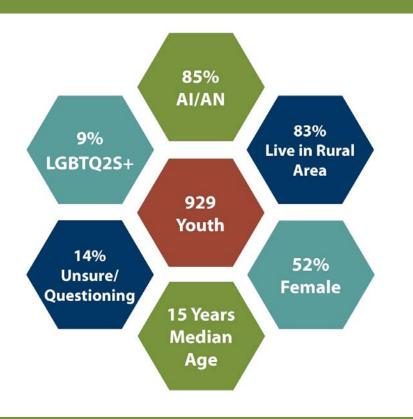




# Major findings

Pre-questionnaire

#### **Reach** – Youth Participant Characteristics

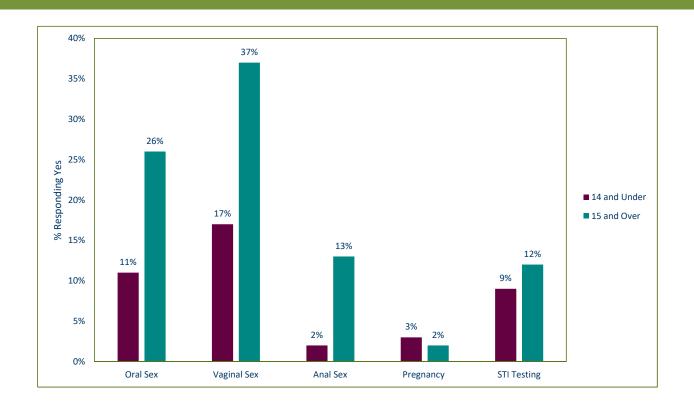


\*929 youth completed both preand post- questionnaires

1,203 youth completed the prequestionnaire only

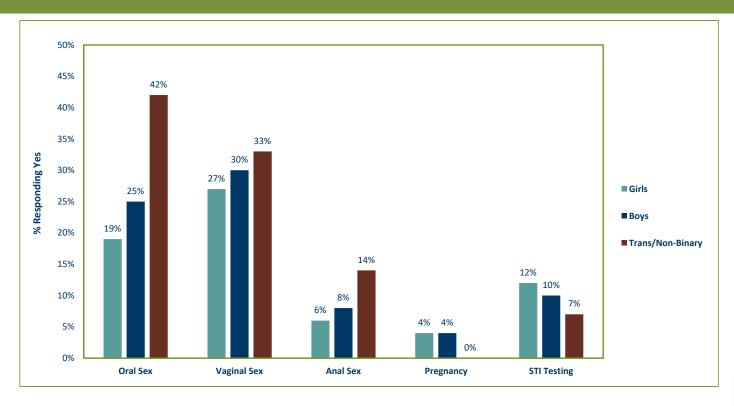


#### **Baseline Sexual Activity by Age**



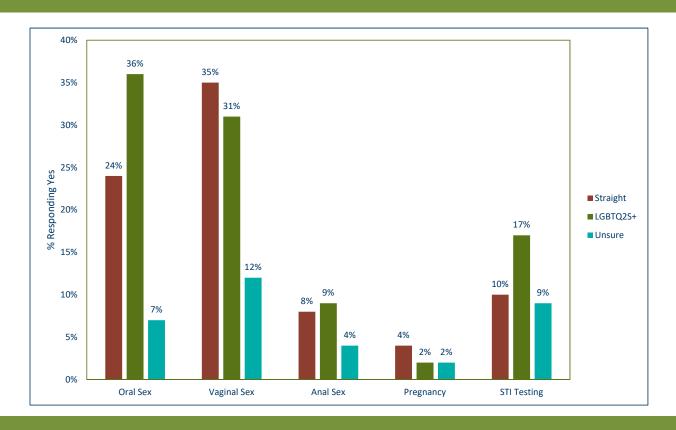


## **Baseline Sexual Activity by Gender**



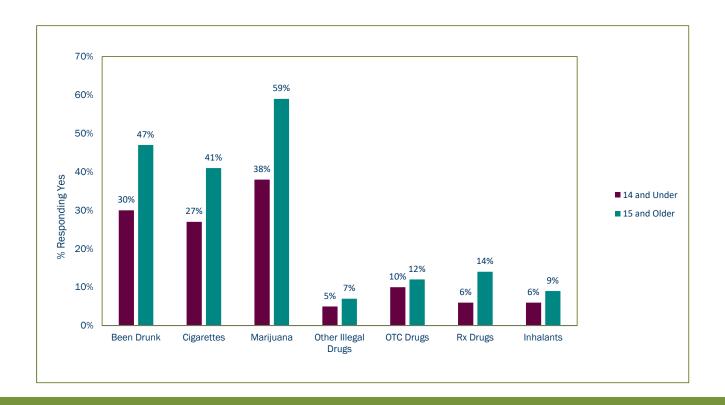


#### **Baseline Sexual Activity by Orientation**



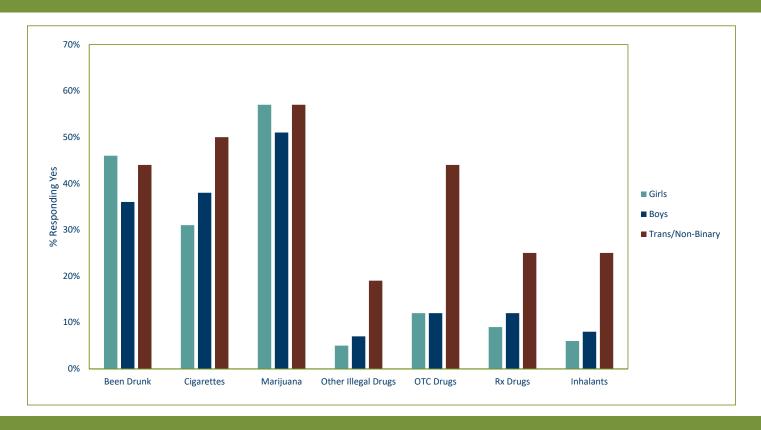


## **Baseline** Drugs and Alcohol by Age



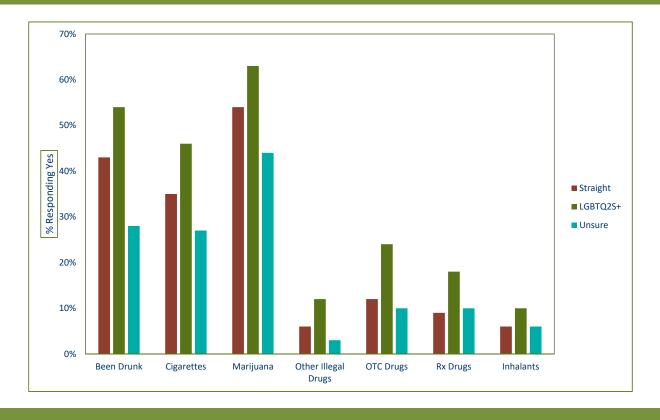


## **Baseline** Drugs and Alcohol by Gender



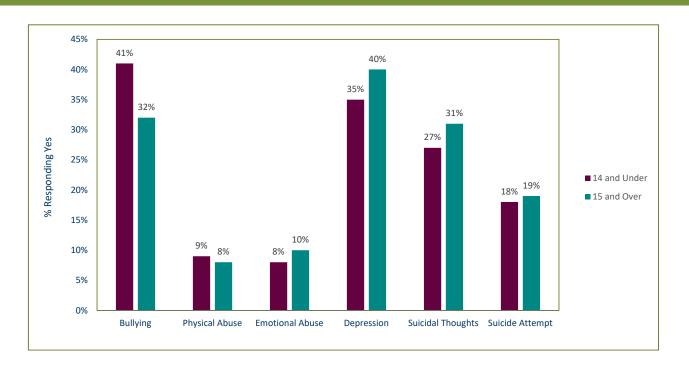


## **Baseline** Drugs and Alcohol by Orientation



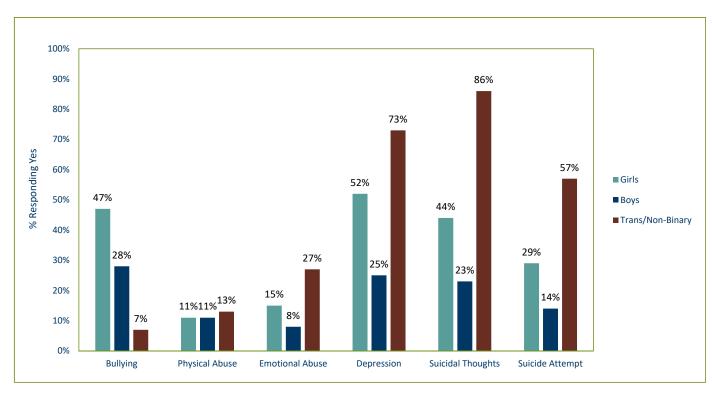


#### **Baseline** Abuse and Mental Health by Age



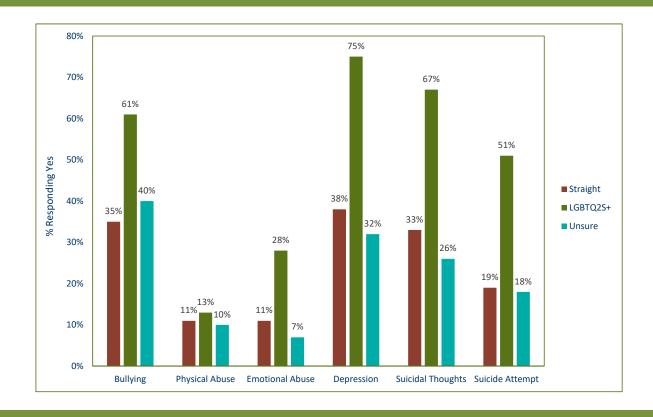


#### **Baseline** Abuse and Mental Health by Gender





## **Baseline Abuse and Mental Health by Orientation**



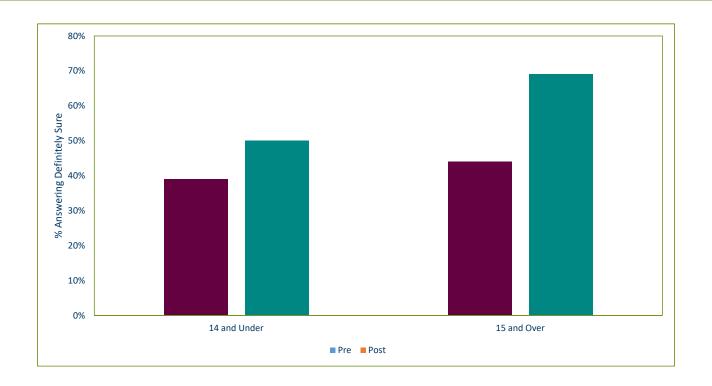


## Major findings

Comparison of pre- to post- questionnaires (n = 923)

## Pre/Post Differences – "Can use condom correctly"

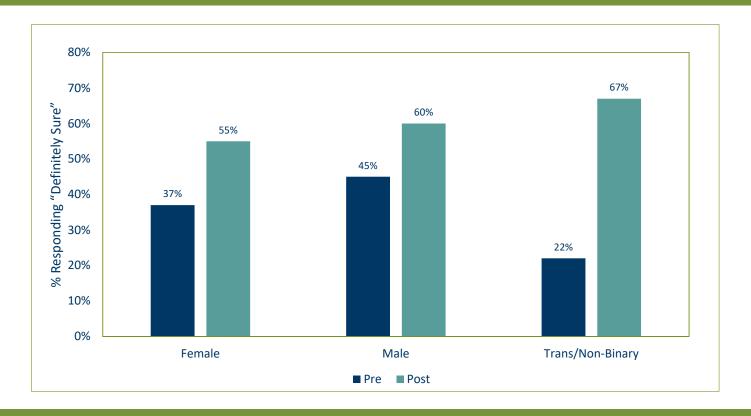
- Age





## Pre/Post Differences – "Can use condom correctly"

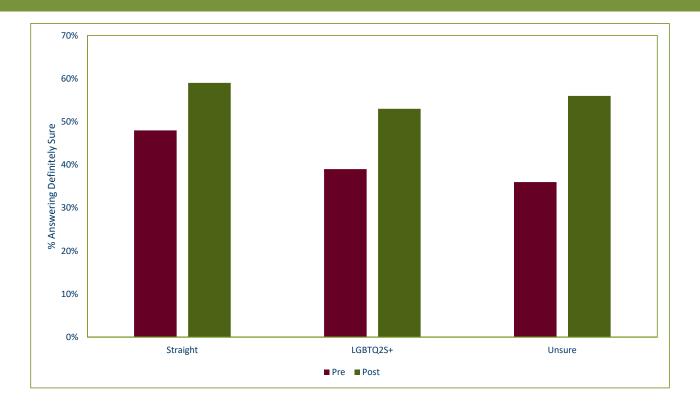
#### - Gender





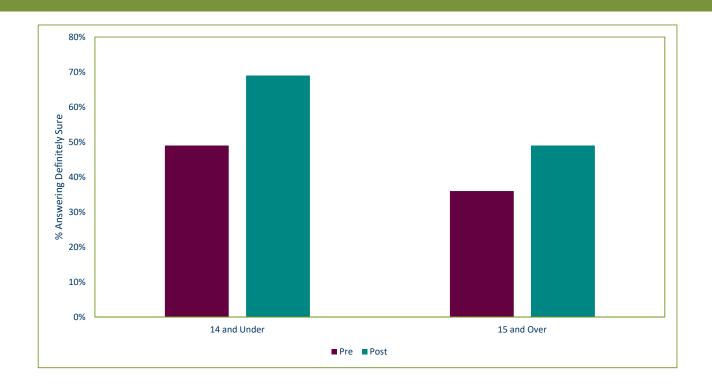
## Pre/Post Differences – "Can use condom correctly"

#### - Orientation



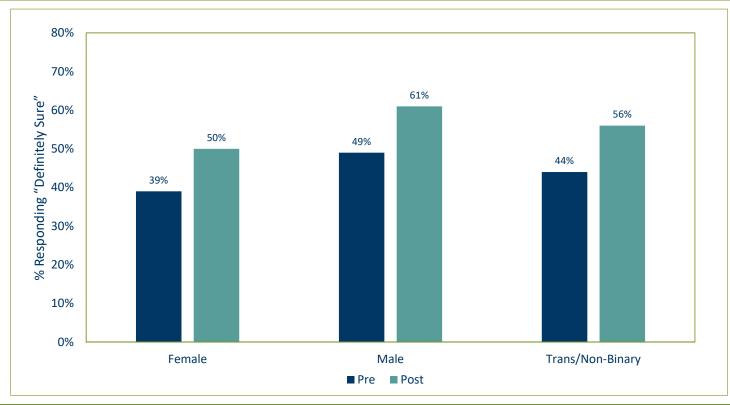


## Pre/Post Differences – "Can get a condom" - Age



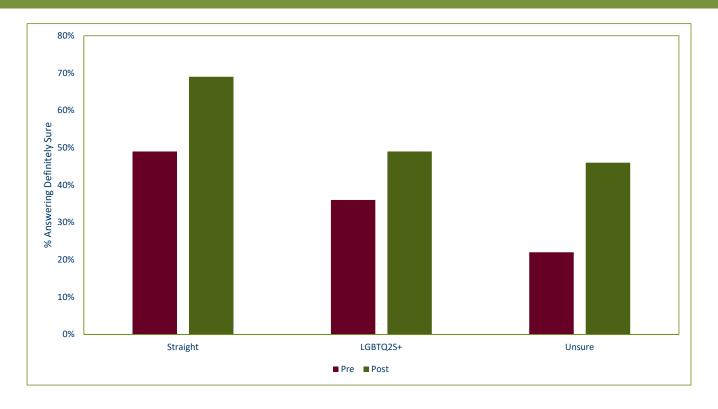


## Pre/Post Differences – "Can get a condom" - Gender



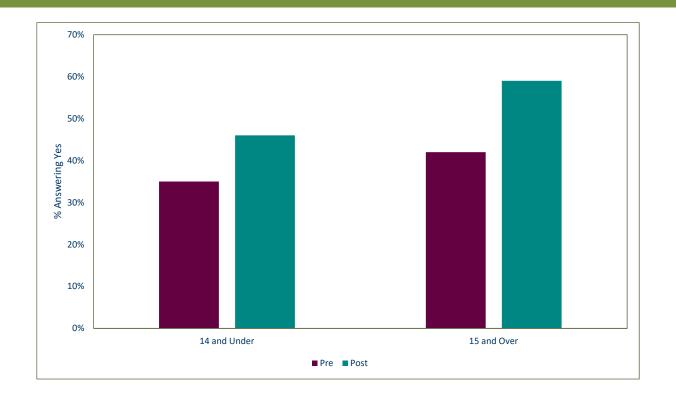


#### Pre/Post Differences – "Can get a condom" - Orientation



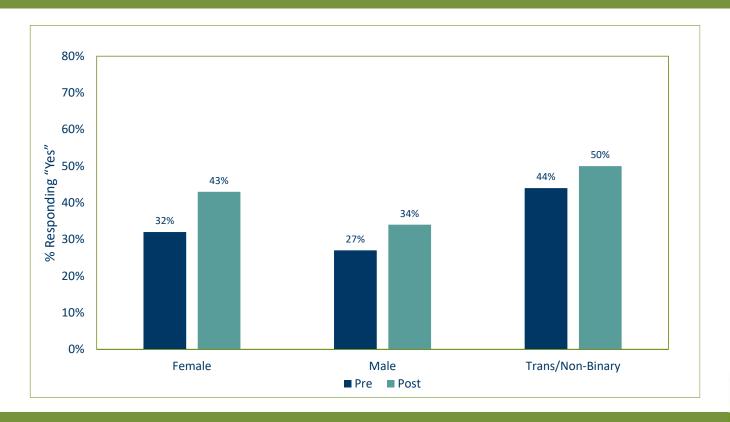


#### Pre/Post Differences – "Had conversation about sex with friends"- Age



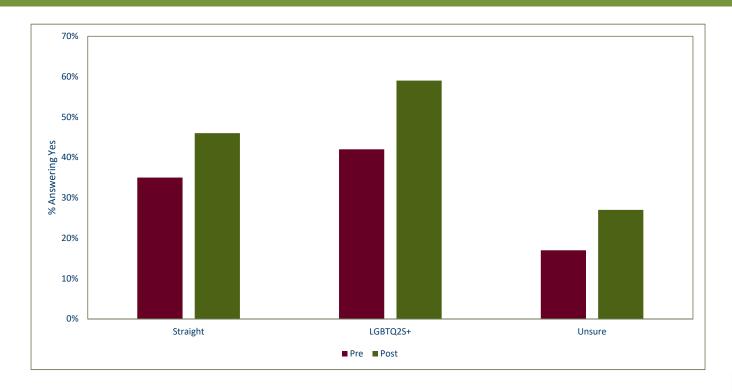


# Pre/Post Differences – "Had conversation about sex with friends" - Gender





## Pre/Post Differences – "Had conversation about sex with friends"-Orientation





## Next Steps

Improvements and enhancements to Native STAND Incorporating Native STAND into the Healthy Native Youth program



#### Improvements to Native STAND

- Make the curriculum more affirmative and inclusive of LGBTQ+2S youth.
- Make more extensive use of digital technology to deliver the learning activities.
- Add current issues: historical trauma, suicide, opioids, sexting, trafficking, vaping, sexual assault awareness
- Add journaling and mindfulness exercises
- Add personal plan for healthy relationships



#### **Current actions**

- Moving content to <u>www.healthynativeyouth.org</u>
- June workshop with 18 educators generated a "wish list" of recommendations and needs.
- Testimonials were video-taped for future marketing efforts.
- Plans are being made to develop new online technical support and training modules.



## What does this mean for you?

How can you get technical assistance?



#### Please keep going with Native STAND!

- Sorry, but we can no longer process the pre- post- questionnaires!
  - But you can do this yourself. Just be careful to keep things anonymous and private.
  - We are happy to send you e-files for any of our supporting materials, but we cannot respond fast.
    (email Dr. Lambert at <a href="mailto:lambertw@ohsu.edu">lambertw@ohsu.edu</a>)
- Documentation is being added to the Healthy Native Youth website (www.healthynativeyouth.org)
- Participate in the Community of Practice calls (second Wednesdays at 10 AM PST)



## Thank you!

- We are continuing to perform analyses and to write reports.
- We will send you copies as the reports are completed over the coming months.
- Soon you will receive copies of PowerPoint slides that you can use as you please to present your findings to your communities.









