



Dissemination of Native It's Your Game 2.0

A Technology-Based Sexual Health Curriculum for American Indian/Alaska Native Youth



Sidhu, A,¹ Elley, C,¹ Craig Rushing, S,² Singer, M,² Jessen, C,³ Gorman, G,⁴ Shegog, R,¹ Markham, C.¹

¹ University of Texas Health Science Center Houston, ² Northwest Portland Area Indian Health Board, ³ Alaska Native Tribal Health Consortium, ⁴ Inter Tribal Council of Arizona, Inc.

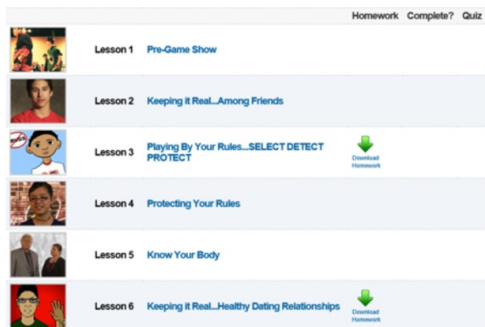
INTRODUCTION

- Evidence-based sexual health curricula (EBSHC) target sexual and reproductive health disparities experienced by American Indian and Alaska Native (AI/AN) youth.¹
- Native It's Your Game (NIYG) is a 13-lesson on-line sexual health education curriculum for AI/AN youth with demonstrated cultural acceptability, usability, and feasibility (Fig. 1).^{1,2}
- Dissemination and implementation (D&I) of EBSHC is challenging. Geographic isolation and limited trained personnel and resources hinder D&I.
- Web-based EBSHC may facilitate D&I by requiring fewer trained facilitators and improving reach and access.

PURPOSE

To describe strategies used to enhance the D&I of the web-based NIYG within AI/AN communities and reach to date.

Fig 1 : NIYG lesson menu (excerpt).



METHODS

Phase I- Curriculum Enhancement Response to Community Feedback

- Enhanced (1) facilitator curriculum manual and (2) technical specifications: HTML/ Java delivery platform; downloadable program option; revised content management system; teacher-student admin. & feedback; enhanced backend tracking database; report generation.

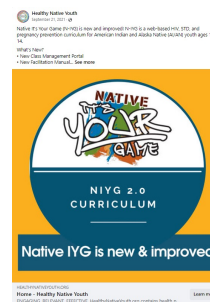
Phase II- Dissemination Strategies and Promotion

- Linkage of NIYG 2.0 to a portal for culturally relevant EBCs (www.HealthyNativeYouth.org).
- Presentations comprising professional meetings and tribal health conferences (n=49); Webinars, and Community of Practice sessions conducted monthly.
- Social media posts on Healthy Native Youth Facebook page and e-newsletters (Fig. 2).
- Iterative troubleshooting and modifications informed by community facilitator field experience (e.g. 'white sheets' and alternate hosting to increase video access).

Phase III- Evaluation

- Monitoring of D&I metrics with backend data tracking and evaluation of reach using web-based GIS analytics.

Fig 2: NIYG 2.0 social media promotion



RESULTS

REACH

- NIYG 2.0 launched in November 2021
- To date, 150 teachers (152 classes, 1790 youth) have successfully implemented NIYG/NIYG2.0 within 13 states across 4 IHS Regions: Northern Plains (MT, ND, SD, MN, WI); Southeast (NY, TN), Southwest (AZ, UT), and Western (AK, CA, OR, WA) (Fig. 3 and 4).

Fig 4 : Reach of NIYG 2.0 (Oct. 2021 – present)

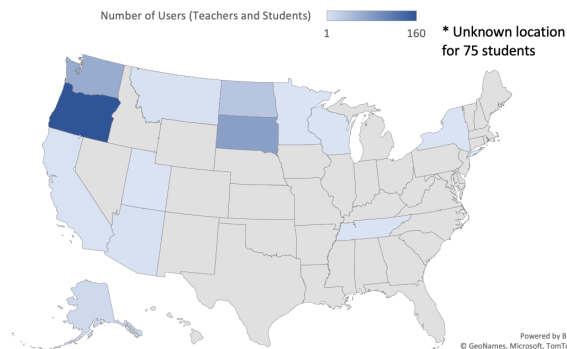
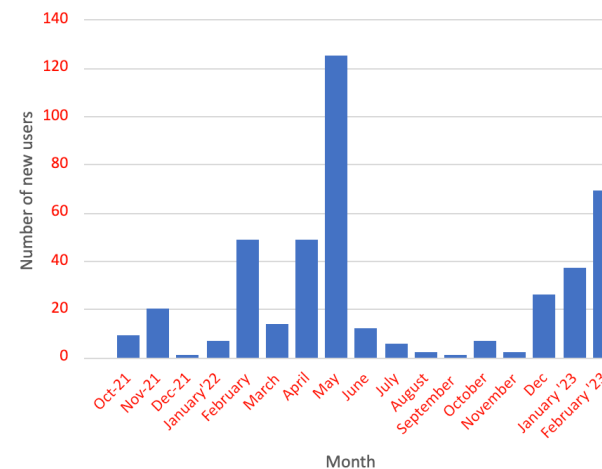


Fig 3 : Number of new users (Oct. 2021 – present)



CONCLUSION

- NIYG 2.0 is a freely accessible online culturally responsive EBSHC with demonstrated success in overcoming common D&I barriers in AI/AN communities.
- GIS can be an asset to implementors to visualize dissemination data, highlight the extent and scope of services and need for resources.
- Planned modifications toward a trauma-informed, 2SLGBTQ, and disability inclusive curriculum promise enhanced D&I potential to improve the sexual health of AI/AN youth.

REFERENCES

- Shegog R, Craig Rushing S, Jessen C et al. (2017) Native IYG: Improving Psychosocial Protective Factors for HIV/STI and Teen Pregnancy Prevention among Youth in American Indian/Alaska Native Communities. JARC, Vol. 8: Iss. 1, Article 3
- Craig Rushing, S., Stephens, D., Shegog, R., et al. (2018). Healthy Native Youth: Improving Access to Effective, Culturally-Relevant Sexual Health Curricula. Frontiers in Public Health. <https://doi.org/10.3389/fpubh.2018.00225>

ACKNOWLEDGEMENTS

The study was funded by the Centers for Disease Control and Prevention (CDC) (#5U48DP001949-02), the Indian Health Service HIV Program and the Secretary's Minority AIDS Initiative Fund.



Technology-Based Sexual Health Curriculum for American Indian/Alaska Native Youth

Sidhu, A,¹ Craig Rushing, S,² Jessen, C,³ Gorman, G,⁴ Shegog, R,¹ Markham, C.¹

¹ University of Texas Health Science Center Houston, ² Northwest Portland Area Indian Health Board, ³ Alaska Native Tribal Health Consortium, ⁴ Inter Tribal Council of Arizona, Inc.

INTRODUCTION

- American Indian and Alaska Native (AI/AN) youth experience sexual and reproductive health disparities.¹
- Culturally relevant sexual health education programs are needed that are culturally acceptable, need fewer trained personnel, provide lesson fidelity, are accessible, and have geographic reach.²
- Effective Internet-based sexual health education programs may reduce disparities by overcoming these challenges.

PURPOSE

To culturally adapt an effective HIV/STI & pregnancy prevention program for use in AI/AN communities, evaluate it's efficacy, enhance it for accessibility and reach, and to disseminate it in Indian Country.

METHODS

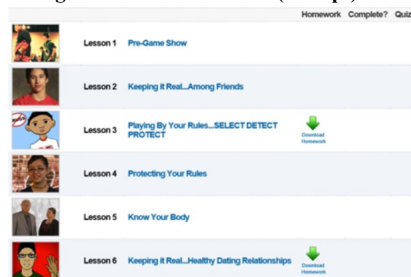
- ADAPT:** Tribal members & youth provided recommendations for cultural acceptance and usability testing (pre- & post-adaptation) provided a data driven approach.
- EVALUATE:** NIYG was rigorously evaluated in a RCT with > 500 AI/AN youth (12-14 yrs.) in 18 tribes in 25 communities in AK, AZ, & the Pacific NW. Psychosocial determinants of sexual behavior were assessed at baseline and 12-month follow-up.
- ENHANCE:** A systematic, iterative, expert review process informed technical and content enhancements for NIYG 2.0.
- DISSEMINATE:** NIYG 2.0 was released for use in Indian Country via the Healthy Native Youth website (Fig. 1 & QR Code).

RESULTS

1. ADAPT

The adapted program, Native IYG, is a 13-lesson online HIV/STI & pregnancy prevention program for AI/AN middle school-aged youth (12-14 yrs.)(Fig. 1).

Fig 1 : NIYG lesson menu (excerpt).



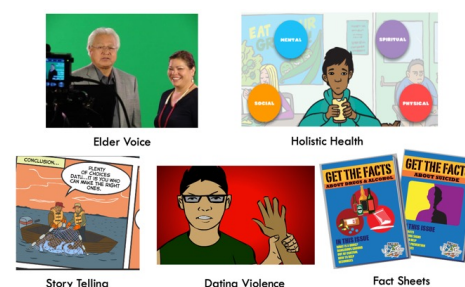
A. Surface cultural adaptation: Enhanced images of clothing, locations, logo design, and language (Fig 2)

Fig 2 : Surface culture example



B. Deep cultural adaptation: Reflecting cultural values, beliefs, & environmental and psychological influencers of sexual health behaviors (Fig. 3).

Fig 3 : Deep culture examples



2. EVALUATE

- A. Participants:**
- Participating youth (n=574):
 - 55.1% self-identified as female,
 - Mean age was 13.2 years, and
 - 6.5% reported being sexually active.



- B. Findings included improved ...**
- Knowledge about condom use.
 - Confidence to obtain condoms and use condoms.
 - Intention to pursue education beyond high school compared to youth in the comparison group.

3. ENHANCE

Next generation curriculum (NIYG 2.0) upgrades ...

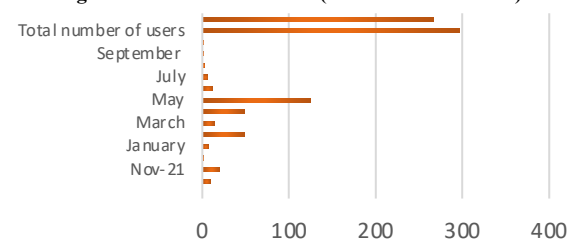


- Curriculum:**
- Updated content responsive to community feedback.
 - Enhanced facilitator curriculum manual.
- Technical specifications:**
- HTML/Java delivery platform.
 - Downloadable program option.
 - Revised content management system
 - Teacher-student admin. & feedback.
 - Enhanced backend tracking database.
 - Report generation.

4. DISSEMINATE

To date NIYG 2.0 has been accessed by teachers (n=144), classes (n=149), and students (n=1781) (Fig 4)

Fig 4 : Number of new users (Oct. 2021 – Oct 2022)



CONCLUSION

- ADAPT:** NIYG provides a culturally acceptable, appealing, and accessible sexual health curriculum to optimize reach and fidelity for to AI/AN youth.
- EVALUATE:** NIYG has demonstrated an evidence-base for increasing protective factors for AI/AN middle school youth and also a predictor of successful vertical social mobility.
- ENHANCE & DISSEMINATE:** NIYG 2.0 represents one of few fully online curricula demonstrated culturally acceptable to AI/AN communities and readily accessible online.
- NEXT STEPS:** A next generation NIYG 3.0 that is responsive to trauma-informed curriculum with greater inclusivity and responsiveness to Two-Spirit and LGBTQ youth is indicated

REFERENCES

- Shegog R, Craig Rushing S, Jessen C et al. (2017) Native IYG: Improving Psychosocial Protective Factors for HIV/STI and Teen Pregnancy Prevention among Youth in American Indian/Alaska Native Communities. JARC, Vol. 8: Iss. 1, Article 3
- Craig Rushing, S., Stephens, D., Shegog, R., et al. (2018). Healthy Native Youth: Improving Access to Effective, Culturally-Relevant Sexual Health Curricula. Frontiers in Public Health. <https://doi.org/10.3389/fpubh.2018.00225>

ACKNOWLEDGEMENTS

The study was funded by the Centers for Disease Control and Prevention (CDC) (#5U48DP001949-02), the Indian Health Service HIV Program and the Secretary's Minority AIDS Initiative Fund.

