

TIP SHEET

SRAE Curriculum Assessment & Enhancement: Incorporating Select A-F Topics

INTRODUCTION

Assessment should be an ongoing process, even if youth are learning and things are going well. The purpose of program assessment, including curriculum assessment, is to improve the **quality** of



the program and its learning outcomes. It is critical to create strong links between curriculum and other program interventions that

ensure fidelity to the curriculum while also being compliant with the Sexual Risk Avoidance Education (SRAE) requirements, including the A-F topics. A formal documented process can help programs improve year after year. Here is a link to one tool, the [Health Education Curriculum Analysis Tool \(HECAT\)](#), to get you started and guide your internal assessment.

WHERE TO START

Begin by selecting a few key subtopics of focus, such as goal setting and healthy decision-making. It is helpful to use a rubric to conduct a gap analysis and reveal areas of opportunity for improvement. A gap analysis process allows organizations

to determine how best to achieve their goals. It compares the current state with an ideal state or goals, which then highlights shortcomings and opportunities for improvement.



Documenting the voice of the youth is another way to identify areas for improvement. This can be achieved by asking a

few review questions after each lesson to determine how much they have learned. For example, can they identify some benefits of goal setting and academic achievement?

When assessing your program interventions, including curriculum, monitor the tone of the message to ensure a focus on the **benefits of avoidance of sexual risk behaviors**. While it is important to discuss consequences of unhealthy risky behaviors, providing information about the benefits of healthy behavior can fill youth with hope and guide them to decisions that support optimal health.

Also, consider the relationships between youth risk behaviors that often are clustered together, such as risky sexual behavior having an interdependent relationship with the use of drugs, alcohol, and tobacco. A recent Health and Human Services study focused on the relationships that influence sexual risk avoidance and cessation. [Conceptual Models to Depict the Factors that Influence](#)

the Avoidance and Cessation of Sexual Risk Behaviors Among Youth (ACF, 2020) can be used to identify environmental, interpersonal, and individual factors your program is impacting and refine your program if necessary.

ENSURING YOUR PROGRAM IS ADDRESSING REQUIRED TOPICS

Assessing your curriculum and program for alignment to the required A-F topics will help you identify areas of weakness or opportunities for enhancement activities. Three of the required SRAE topics that have been challenging for programs to incorporate include information about the Success Sequence, sexually transmitted infections/sexually transmitted diseases (STIs/STDs), and dating violence and sexual coercion. Here are some tips and strategies for incorporating these topics into your SRAE program.

THE SUCCESS SEQUENCE

(TOPICS A AND C)

One of the key SRAE topics focuses on the importance of self-regulation, which can be linked with the benefits of following the Success Sequence.

The Steps of the Success Sequence

- 1 Get a high school diploma
- 2 Get a full-time job
- 3 Get married before having children

Required SRAE A-F Topics

- A. The holistic individual and societal benefits associated with personal responsibility, self-regulation, goal setting, healthy decision-making, and a focus on the future.
- B. The advantage of refraining from non-marital sexual activity in order to improve the future prospects and physical and emotional health of youth.
- C. The increased likelihood of avoiding poverty when youth attain self-sufficiency and emotional maturity before engaging in sexual activity.
- D. The foundational components of healthy relationships and their impact on the formation of healthy marriages and safe and stable families.
- E. How other youth risk behaviors, such as drug and alcohol usage, increase the risk for teen sex.
- F. How to resist and avoid, and receive help regarding, sexual coercion and dating violence, recognizing that even with consent teen sex remains a youth risk behavior.

The Success Sequence is an example of self-regulation in that youth choose to regulate their own behavior to accomplish a greater goal (Murray, et al., 2014).



The Success Sequence shows a strong correlation between youth behavior and success in life. Youth who follow the Success Sequence have only a 3 percent chance of living in poverty, and 91 percent of young men and women from lower-income families who follow

the Success Sequence avoid poverty in their late 20s and early 30s (Wang & Wilcox, 2017).

Tips and strategies for incorporating the Success Sequence into your program. It may be challenging for students, especially middle schoolers, to conceptualize themselves achieving the steps of the Success Sequence, such as marriage and having children of their own. However, they can identify everyday examples to understand goal setting and self-regulation. Begin by defining goal setting, considering **Bloom's Taxonomy**, and showing youth that goals and success are achieved in small and large ways. Examples could include academic goals (success on a test by studying and planning), or sports, band, or theater success through frequent and consistent practice (Huber & Tannis, 2020).

Guide discussions on how the habits and disciplines they are forming now can affect what they achieve later. Give youth the opportunity to practice and build skills to prove to themselves they can plan and accomplish goals. Use activities to build self-efficacy. For example, they could be assigned a homework task of sharing a specific life goal with a trusted adult and then determine when and where they could talk to that person. As instructors, realize that youth know these concepts already, but according to Social Development Theory, may need a More Knowledgeable Other to show them how to put into practice what they already know (Cherry, 2020).

IMPROVE PHYSICAL HEALTH (PREVENTING STIs/STDs) (TOPIC B)

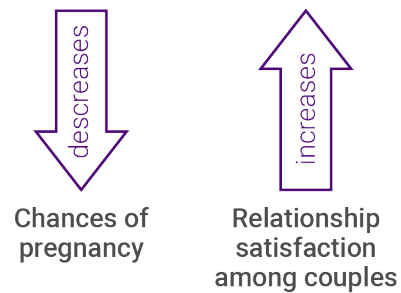
STIs/STDs are an especially strong risk for youth who engage in sexual activity. Of the 26 million new STIs in 2018, almost half were among youth aged 15-24 (CDC, 2021, January). Delayed sexual activity



reduces chances of pregnancy and STI/STD transmission while improving reported relationship satisfaction among couples. In addition, delayed sexual activity increases the chances of high school graduation among girls (OPRE, 2020).

Tips and strategies for incorporating

DELAYED SEXUAL ACTIVITY



STI/STD content into your program. Prior to working with the students in a school setting, give school personnel (i.e., classroom teachers, school nurses, counselors) notice that you will be covering STIs/STDs, so they can prepare for follow-up care and questions. You can also equip SRA facilitators and staff to be aware that any student in any given class or setting could be experiencing an STI/STD and explore emotional intelligence training for staff and presenters to prepare them to compassionately share information.

When providing information to youth on STIs/STDs, remember to cite medically accurate and up-to-date sources, such as the Centers for Disease Control and Prevention (**CDC**), and share resources to help youth recognize their risk if sexually active. Inform students of

specific prevalence and incidence rates for their age group and use data from your local or state health department, when possible. Assess your classroom activities to ensure there are no unintended consequences (especially for students that may have an STI/STD). Make sure examples are objective and not personal, and don't put a student in an uncomfortable or triggering situation.

CONSENT AND DATING VIOLENCE (TOPIC F)

While teaching self-regulation is an important part of SRAE, it also is important to educate youth about situations that could be out of their control.

Sexual coercion is a specific form of an unhealthy relationship that includes any type of nonphysical pressure used to make someone participate in sexual activity they do not agree to (CDC, 2021, February). Sexual coercion includes verbal put-downs; making someone feel pressure, guilt, or shame; threats to get sex; and getting someone drugged or drunk to have sex.

Dating violence is an unhealthy relationship involving harm of a romantic partner in some way, whether it is physically, sexually, emotionally, or all three. It can happen on a first date or after partners have fallen deeply in love.

DATING VIOLENCE IS NEVER THE VICTIM'S FAULT.

Tips and strategies for incorporating consent and dating violence content into your program. One way to minimize the risk of sexual coercion is to teach youth the difference between healthy and unhealthy relationships. Use activities that give students

an opportunity to identify healthy vs. unhealthy relationship characteristics by using nonsexual examples. For example, have students list qualities they want in a friend and relate that to healthy relationship characteristics.

Another method is to give students the opportunity to build and practice resistance and refusal skills. Allow students to practice affirmative "**I statements**" to own their no (Hinstorff et al., 2018). You can also share your state Age of Consent laws or have students research their state law as an activity, if age appropriate. Help students identify a trusted adult by giving scenarios and having students identify a specific person they could go to. If they can't identify a trusted adult, provide direction to establish one. Remember to share appropriate referral systems and local organizations or give information on hot lines to all students so they have it for future reference.

References

- Administration for Children and Families (2020, February). *Conceptual models to depict the factors that influence the avoidance and cessation of sexual risk behaviors among youth*. Retrieved from https://www.acf.hhs.gov/sites/default/files/documents/opre/sra_src_conceptual_models_feb_2020.pdf
- Centers for Disease Control and Prevention (2021, January). Sexually Transmitted Diseases. *Adolescents and young adults*. Retrieved from <https://www.cdc.gov/std/life-stages-populations/adolescents-youngadults.htm>
- Centers for Disease Control and Prevention (2021, February). Violence Prevention. *Sexual violence*. Retrieved from <https://www.cdc.gov/violenceprevention/sexualviolence/index.html>
- Cherry, K. (2020, April 28). *The Zone of*

Proximal Development as defined by Vygotsky. Very Well Mind. Retrieved from <https://www.verywellmind.com/what-is-the-zone-of-proximal-development-2796034>

- Hinstorff, S., Ginsburg, I., & Rosales, R. (2018, September 4). *Avoid conflict with “I statements.”* Center for Parent and Teen Communication: Talking with Parents. Retrieved from the Center for Parent & Teen Communication <https://parentandteen.com/tips-for-teens-avoid-conflict-with-parents/>
- Huber, C. & Tannis, L. (2020, September 16). Curriculum fidelity and strategies for ensuring successful transfer of skills. Presentation at the SRAE TTA Virtual Topical Training. Public Strategies (Producer) for the Family and Youth Services Bureau Adolescent Pregnancy Prevention Program. Retrieved from *The Exchange*. <https://teenpregnancy.acf.hhs.gov/resources/curriculum-fidelity-and-strategies-ensuring-successful-transfer-skills-0>
- Murray, D. W., Rosanbalm, K., Christopoulos, C., & Hamoudi, A. (2014, January). *Self-regulation and toxic stress: Foundations for understanding self-regulation from an applied developmental perspective.* OPRE Report 2015-21, Washington, DC: Office of Planning, Research, and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.

- Office of Planning Research and Evaluation (2020, June 11). *Assessing the benefits of delayed sexual activity: A synthesis of the literature.* Retrieved from <https://www.acf.hhs.gov/opre/report/assessing-benefits-delayed-sexual-activity-synthesis-literature>
- Wang, W. & Wilcox, W. Brad. (2017, June 14). The Millennial Success Sequence: Marriage, kids, and the “Success Sequence” among young adults. American Enterprise Institute and the Institute for Family Studies. Retrieved from <https://www.aei.org/research-products/working-paper/millennials-and-the-success-sequence-how-do-education-work-and-marriage-affect-poverty-and-financial-success-among-millennials/>

Additional Resources for Curriculum Assessment and Enhancement

[Click here](#) for additional resources on Curriculum Assessment and Enhancement and Select A-F Topics.

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