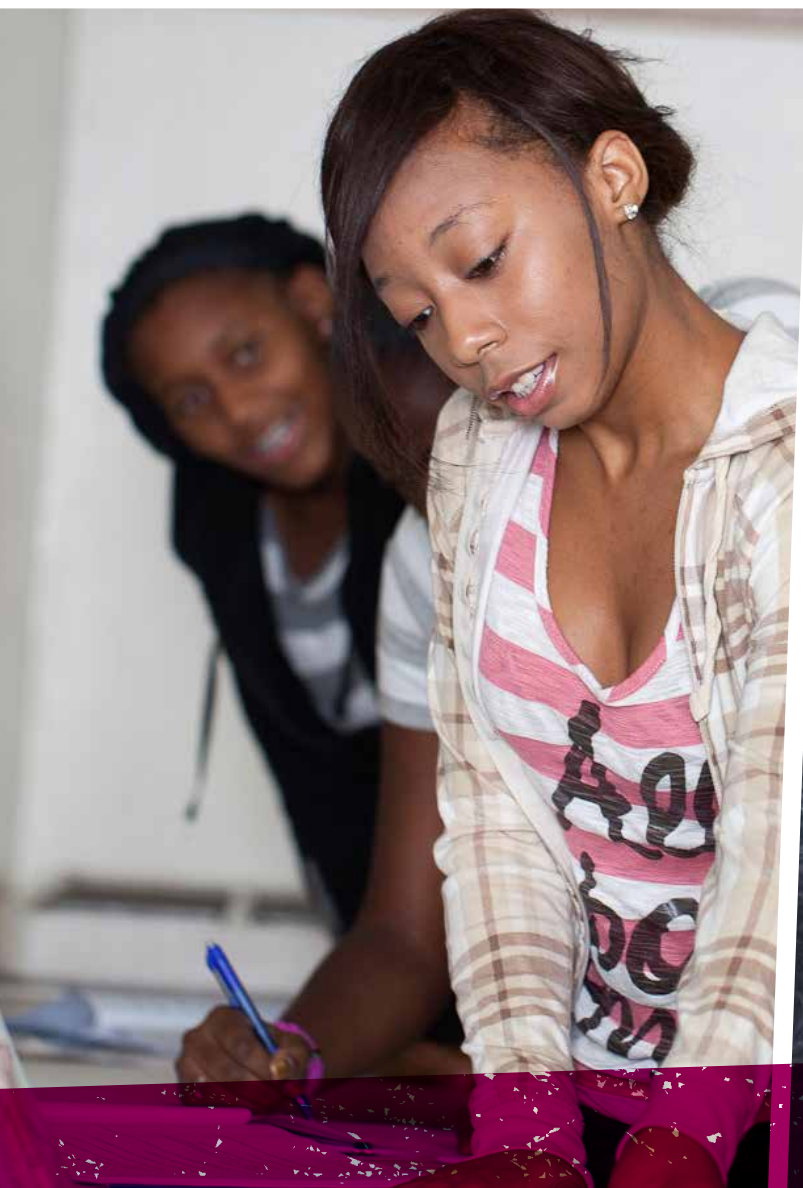




PROGRAM IMPLEMENTATION AND ADAPTATION MANUAL





PROGRAM IMPLEMENTATION AND ADAPTATION MANUAL

*By Lori Rolleri, Nicole Trevino, Mandy Colbert, Jenifer DeAtley,
and Andrew Levack*



EngenderHealth
for a better life

EngenderHealth is a leading global women's health organization committed to the belief that reproductive health is a human right and that access to reproductive health services is vital for women and girls to reach their full potential. We train health care professionals and partner with governments and communities to make high-quality sexual and reproductive health services available today and for generations to come. To learn more about EngenderHealth, visit www.engenderhealth.org.

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SECTION 1

INTRODUCTION TO GENDER MATTERS

USING THE GENDER MATTERS PROGRAM IMPLEMENTATION AND ADAPTATION MANUAL

PURPOSE OF THIS MANUAL

The *Gender Matters Program Implementation and Adaptation Manual* is designed to support anyone involved with implementing the Gender Matters program, such as program administrators, coordinators, facilitators, and evaluators. In addition to the *Gender Matters Program Implementation and Adaptation Manual*, the *Gender Matters Evaluation Compendium* and the *Gender Matters Facilitator Training Guide* complete a suite of helpful resources for implementing and evaluating the Gender Matters program.

This manual can be used to:

- Assess the readiness of your organization to implement the Gender Matters program
- Identify and establish potential program partnerships
- Develop and conduct a formative assessment
- Recruit youth
- Hire and train project staff (also see the *Gender Matters Facilitator Training Guide*)
- Make informed adaptations
- Implement the program effectively
- Begin to think about and develop a process and/or outcome evaluation (also see the *Gender Matters Evaluation Compendium*)
- Advocate for implementation of the Gender Matters program
- Develop grant proposals

ORGANIZATION OF THIS MANUAL

The *Gender Matters Program Implementation and Adaptation Manual* is divided into five major sections:

1. Introduction to Gender Matters
2. Gender Matters Core Components
3. Implementing Gender Matters
4. Making Adaptations to Gender Matters
5. Supplemental Reading and Other Resources

While each section of this manual builds on the previous section, it is also possible for readers to use the sections most relevant to them in their process of implementing and/or evaluating Gender Matters and turn back to others when needed.

In this Introduction section, you will find:

- An overview of the Gender Matters program, including its goals, objectives, priority population, three complementary program components, and unique features
- An overview of how Gender Matters was developed, including a description of the logic model process used to map the program, a review of the literature about gender norms and their association with reproductive and sexual health, a summary of formative assessment data, and short descriptions of the health behavior change theories that informed the development of the program

Gender Matters Logic Model

The logic model used to develop Gender Matters is known as the Behavior-Determinant-Intervention (BDI) logic model. The logic model graphically depicts the theory of change of the intervention and intentionally and deliberately links curriculum activities with intervention activities. The application of the BDI logic model is described in greater detail later in this section of the manual.

OVERVIEW OF THE GENDER MATTERS PROGRAM

WHAT IS GENDER MATTERS?

Three-Component Prevention Program

Gender Matters (Gen.M) comprises three complementary components: 1) the 20-hour Gen.M curriculum, 2) a social media campaign, and 3) the recording of youth-generated video messages about gender, relationships, sexual decision making, and prevention of pregnancy and sexually transmitted infections (STIs). Essential to all three components is exploring how inequitable and unhealthy gender norms affect adolescent sexual decision making. Gender is an important theme that runs through all Gender Matters activities and is a key element of the program's theory of change. Each of the three Gender Matters components is described in greater detail later in this section.

What is the difference between Gender Matters and Gen.M?

Gender Matters is the project name of the three-component teen pregnancy and STI prevention program.

Gen.M is the name used to refer to the curriculum component of the program, and it is how we refer to the program when interacting with youth participants.

Gender Matters—Three Program Components

1. 20-hour Gen.M curriculum
2. Social media campaign
3. Youth-generated video messages about gender, relationships, sexual decision making, and prevention of pregnancy and STIs

Important Note

The description of the Gender Matters intervention below is based on the research study that was conducted in Austin, Texas, between 2010 and 2015. It is possible to make adaptations to Gender Matters with regard to the target population, setting, facilitation, and evaluation. These adaptations are described in more detail in Section 4: Making Adaptations to Gender Matters (page 81).

Priority Population

Gender Matters was developed and tested in Austin, Texas, with a mixed-sex group of 14–16-year-old youth living in 12 zip codes with the highest rates of teen pregnancy in Travis County (TDSHS, 2010). The majority of the youth were Latino (37%) and African American (57%).

Behavioral Goals

The goal of Gender Matters is to reduce the rates of pregnancy and STIs among youth aged 14–16. To achieve this goal, the program seeks to influence three behavioral outcomes:

For youth who are not sexually active:

1. Delay the onset of sexual intercourse

For youth who are sexually active:

2. Increase use of the most effective contraceptive methods, including hormonal contraception and the intrauterine device (IUD)
3. Increase consistent and correct use of condoms

Learning Objectives

Fifteen overarching learning objectives support the achievement of the Gender Matters behavioral goals.

After completion of the Gender Matters program, participating youth will be able to:

1. Distinguish between healthy and unhealthy gender norms
2. Discuss how gender norms influence sexual decision making
3. Adopt healthy and equitable gender norms
4. Identify healthy and unhealthy relationship characteristics
5. Communicate assertively
6. Ask for and give sexual consent
7. Make informed personal decisions about sex

8. Show love and affection in ways that do not include sex
9. Describe the basics of human reproductive anatomy, and how fertilization occurs
10. Describe how STIs are transmitted, common STI symptoms, the prevention of STIs, and the importance of regular STI testing (if sexually active)
11. Use a condom correctly
12. Describe how to overcome common challenges associated with condom use
13. Negotiate condom use with a partner
14. Describe how the most effective methods of contraception work to prevent pregnancy, how to use them, and where to get them
15. Describe the services available at a local reproductive health center, what to expect during a clinic visit, and how to make an appointment

Setting

Gender Matters was implemented during the summer months, while youth were out of school and participating in the Travis County Summer Youth Employment Program. Youth attended a four-hour Gen.M session every day for five consecutive days (Monday–Friday). The Gen.M curriculum was delivered in a classroom setting on the University of Texas at Austin campus. The classrooms were a large, private area where the participants could move around freely. Chairs were set up in semicircle with the facilitators at the front of the circle. Tables and chairs were also set up for small-group and individual work. Participants arrived at the site either by personal transportation or on a public bus.

Curriculum Facilitators

The Gen.M curriculum was cofacilitated by one male and one female facilitator. Having male and female facilitators work together and model cooperative relationships is an important process for demonstrating gender equality and respectful communication. In addition, having a male and female facilitator allows for same-sex youth discussions that are part of some Gen.M activities.

Group Size

Gen.M was designed for groups of 12–15 mixed-sex participants in an out-of-school setting. Based on the study team's experience, this an ideal number of participants for facilitating interactive activities while also keeping to the time allotted for each activity.

Evaluation

The development, implementation, and evaluation of the Gender Matters program was funded by the Department of Health and Human Services, Office of Adolescent Health (OAH) (2010–2015). Shortly after being awarded funding, Gender Matters was selected to be one of eight OAH grantees to undergo a rigorous federal evaluation using a randomized control trial. The evaluation was led by an independent evaluation firm (Mathematica

Policy Research). More information about how Gender Matters was evaluated is found in the Gender Matters Evaluation Compendium.

Partners

EngenderHealth's success in developing, implementing, and testing this innovative program is due to the synergy created by the varying sets of skills, experiences, and perspectives of all partners involved.

- SafePlace¹ played an important role in developing and field-testing certain Gen.M activities during the development of the curriculum. SafePlace educators also served as the primary facilitators of the Gen.M workshops with youth participants.
- The Travis County Summer Youth Employment Program² provided EngenderHealth access to recruit hundreds of youth involved in their program over four years.
- Planned Parenthood of Greater Texas provided training to workshop facilitators on sexual and reproductive health and provided clinic resource materials for youth participants.
- Columbia University's Mailman School of Public Health managed the formative and process evaluation activities, including participant questionnaires, focus groups, and analysis of findings. These materials can be found in the Gender Matters Evaluation Compendium.

UNIQUE FEATURES OF GENDER MATTERS

Gender Matters includes four unique features that distinguish it from most other teen pregnancy and STI prevention programs. These are described briefly below.

1. Addressing Gender Norms as an Important Determinant of Sexual Risk Behavior

The Gender Matters program aims to transform harmful gender norms associated with sexual risk-taking behaviors. For example, young men who have been conditioned to believe that having sex, having sex with multiple partners, and/or having unprotected sex equates to “manliness” are at a greater risk for unintended pregnancy and contracting an STI. Young women who believe they should acquiesce to men's desires also put themselves at risk for unintended pregnancy and STIs. Gender Matters uses a gender-transformative approach (described on page 17) to raise awareness about harmful gender norms, engage youth in questioning the costs of adhering to these norms, and guiding them in redefining these norms into healthier, more equitable ones.

¹ SafePlace is a nonprofit organization located in Austin, Texas. It provides comprehensive services related to domestic violence. For more information about SafePlace, visit their web site at: <http://safeplace.org>.

² The Summer Youth Employment Program provides a variety of work-based learning opportunities to youth aged 14–17 throughout the City of Austin and Travis County. For more information about the Summer Youth Employment Program, visit their web site at: http://www.co.travis.tx.us/health_human_services/children_services/youth_employment_program.asp.

2. Reinforcing Key Messages Via Social Media and Youth-Generated Video Messages

The Gender Matters program uses various methods to reinforce key messages related to equitable gender norms, healthy relationships, sexual decision making, and prevention of pregnancy and STIs. It includes a social media campaign designed to reinforce key curriculum messages and create a community of participating youth who reinforce positive social norms. The social media campaign involved a private Facebook group page that allows for information sharing and group discussion, as well as a series of text messages delivered over four consecutive months. In addition, each of the curriculum's five sessions ends with a review activity that encourages youth to state, in their own words, key messages or key takeaways from the session while being videotaped. These youth-generated video messages are then edited and posted on the Gender Matters Facebook group page and are shown at an optional community event.

3. Working with Youth Participating in a Summer Youth Employment Program

Gender Matters is the first pregnancy and STI prevention program to be studied among young people enrolled in a summer youth employment program. Young women and men aged 14–16 who enrolled in the Summer Youth Employment Program of Travis County (2011–2014) had the opportunity to participate in the 20-hour Gen.M curriculum over a period of five consecutive days.

4. Bridging the Fields of Teen Pregnancy Prevention and Intimate Partner Violence

Gender stands out as a common determinant of risk for both intimate partner violence and teenage pregnancy. By working during the development of the curriculum with an organization that combats domestic violence, Gen.M stands out in its efforts to combine prevention education so as to avoid these often overlapping issues in young people's lives.

THE THREE COMPONENTS OF GENDER MATTERS

Gender Matters is an evidence-informed program designed to promote adolescent sexual health by reducing teen pregnancy and STIs. The program comprises three complementary and overlapping components: 1) a 20-hour Gen.M curriculum, 2) a social media campaign, and 3) youth-generated video messages about gender, relationships, and sexual decision making, and about the prevention of pregnancy and STIs. The three components work in synchronization with each other to reinforce key messages about healthy behaviors and attitudes.

Component 1: The 20-Hour Curriculum

Component 1 of the Gender Matters program is a 20-hour interactive teen pregnancy and STI prevention curriculum known as Gen.M. The curriculum is divided into five four-hour sessions delivered consecutively over five days. Each session consists of 5–7 participatory activities, concluding each day with a review activity designed to elicit and document key messages that the youth internalized during the session. The curriculum is facilitated by one male and one female educator with small groups of about 15 boys and girls ages 14–16.

Key to the curriculum's theory of change is the influence of gender norms on sexual decision making. Awareness about the role that gender plays in forming sexual attitudes and behaviors is woven into every session. Youth are encouraged to question the costs to themselves, their partners, and their peers of adhering to rigid, inequitable gender norms and to explore healthy and equitable ways of expressing what being a man or a woman means to them. The theory-of-change logic model describes how curriculum activities are deliberately and strategically linked to changing prioritized psychosocial determinants, like gender norms; it is found in Appendix 1 (At-a-Glance Version, page 101) and Appendix 2 (Comprehensive Version, page 104).

Each of Gen.M's five sessions is devoted to a particular theme. The overview on page 10 provides an outline of the themes and topics covered during each session. While Gen.M is not a "scripted" curriculum, it provides detailed instructional plans for each learning activity. Implementing organizations are advised to follow these instructional plans to maintain fidelity to Gen.M's core components.

Component 2: The Social Media Campaign

The Gender Matters social media campaign engages youth to reinforce curriculum material, concepts, and messages and to support them in maintaining their intention to make healthy sexual decisions. After voluntarily electing to join the group, participants are free to ask questions, participate in weekly contests, post pictures and videos, discuss what they learned from Gender Matters, or share news and other health-related information. In addition to the Gender Matters social media group, weekly text messages are designed to reinforce key behavioral and attitudinal messages as well as drive youth to whatever social media platform is being used.

Component 3: Youth-Generated Video Messages

At the close of each Gen.M session, youth are filmed participating in an interactive activity designed to elicit their thoughts and opinions about the session's key messages. The video footage is used in a variety of ways to highlight what youth have learned. Clips from the video footage are posted to the Facebook group page throughout the social media campaign, as a way to generate interest in the Facebook group, remind youth of their experience, and inspire conversations surrounding the curriculum's key themes. Footage from all five sessions is edited into a short film, which is then premiered at an optional celebration event for youth participants following the workshop.

Gen.M Session	Short Description of Session	Session Activities
Session 1: Understanding Gender	Youth become aware of, question, and redefine gender norms in ways that build equitable relationships and promote health and well-being.	<ol style="list-style-type: none"> 1. Welcome and Overview 2. Values Clarification 3. Gender Messages 4. Gender in the Media 5. Video Review—It's about Me
Session 2: Healthy Relationships	Youth identify the characteristics of healthy and unhealthy relationships while building skills to ensure that their own relationships are fulfilling, enjoyable, and healthy.	<ol style="list-style-type: none"> 1. Session 2 Check-In 2. Healthy Relationships and Deal-Breakers 3. Assertive Communication 4. What Is Consent? 5. Video Review—Creative Expressions
Session 3: Big Decisions	Youth identify the challenges of being a teen parent and build skills in making healthy decisions about sexual activity	<ol style="list-style-type: none"> 1. Session 3 Check-In 2. Life Changes 3. Sexual Decision Making 4. Ways to Show You Care 5. Video Review—Gender Fishbowl
Session 4: Skills for Preventing Pregnancy	Youth learn about pregnancy and STIs and build their skills in preventing both, through the consistent and correct use of condoms.	<ol style="list-style-type: none"> 1. Session 4 Check-In 2. Keeping the Egg and Sperm Apart 3. The Truth about STIs 4. How to Use Condoms 5. Condom Obstacles 6. Negotiating Condom Use 7. Video Review—Condom Slogans
Session 5: Taking Action to Prevent Teen Pregnancy	Youth learn about the most widely accessible hormonal and long-acting contraceptives and where to obtain them. The session also asks youth to identify personal behaviors that they intend to sustain or change so as to prevent pregnancy.	<ol style="list-style-type: none"> 1. Session 5 Check-In 2. Birth Control Report 3. The Clinic 4. Game Show Review 5. Video Review—Making a Commitment 6. Closing Activity—Spider Web

UNDERSTANDING HOW THE GENDER MATTERS INTERVENTION WAS DEVELOPED

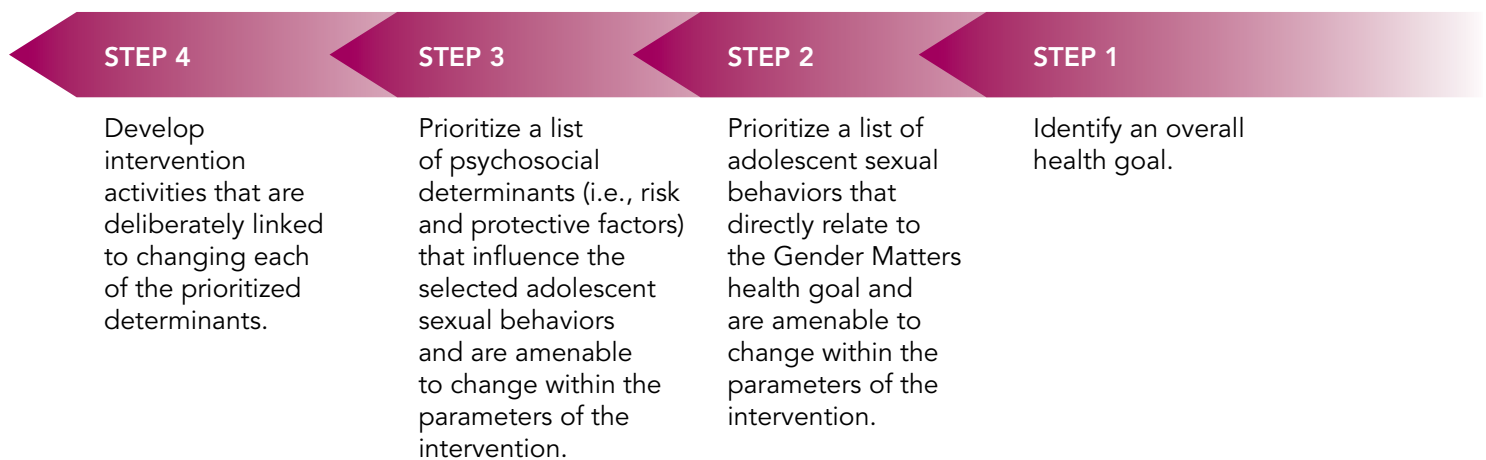
The Gender Matters development team used several methods to develop this evidence-based and innovative intervention, including the development of a theory-of-change logic model (the Behavior-Determinant-Intervention model, or BDI), a literature review of the key determinants selected for the logic model, a review of health behavior change theories (e.g., social cognitive theory), formative research, and pilot testing. Each of these methods is described in more detail below.

GENDER MATTERS THEORY-OF-CHANGE LOGIC MODEL

The Gender Matters development team chose the BDI logic model (Kirby, 2004) to map and design the Gender Matters program. The logic model was also an important tool for developing process and outcome evaluation activities.

There are four major steps in building a BDI logic model; it is developed by moving from right to left (see Figure 1). When it is completed, it is read from left to right.

Figure 1: Four Steps to Developing a BDI Logic Model



Step 1: Identify Health Goals

First, the development team identified an overall health goal for the program that was consistent with funder requirements and contextual parameters. In the case of Gender Matters, the goal was to “reduce the rate of pregnancy and sexually transmitted infections among youth aged 14–16 years participating in the Summer Youth Employment Program in Austin, Texas.” Given the project’s funding and time limitations, this goal will not be evaluated through an impact evaluation; however, it serves as a critical anchor in conceptualizing the program.

Step 2: Prioritize Behaviors

During the second step, the development team prioritized a list of three teen sexual behaviors that are directly related to achieving the health goal and were considered achievable through a (primarily) curriculum-based program. These three behaviors are:

For youth who are not sexually active:

1. Delay the onset of sexual intercourse

For youth who are sexually active:

2. Increase use of the most effective contraceptive methods, including hormonal contraception and the IUD
3. Increase consistent and correct use of condoms

Step 3: Select Determinants (Risk and Protective Factors)

During the third step, the development team identified and then prioritized a list of psychosocial determinants (also known as risk and protective factors) that influence teen sexual behaviors and that are also amenable to change through a (primarily) curriculum-based program. The third step required that the team review the current research literature on risk and protective factors associated with adolescent sexual risk taking, collect and analyze formative data from youth similar to the study youth in Austin, Texas, and review relevant health behavior change and education theories to inform the selection of determinants for the Gender Matters logic model.

Step 4: Design Intervention

By completing Steps 1–3, the development team came to a solid understanding of the overall health goal and the factors that influence it. With this understanding, the team was ready to complete the fourth step of the BDI logic model process—developing interactive learning activities that very deliberately address each of the selected determinants. The team consulted several resources during Step 4, including a description of 17 characteristics of effective sex and HIV education programs (Kirby, Rolleri, & Wilson, 2007), *Reducing Adolescent Sexual Risk: A Theoretical Guide for Developing and Adapting Curriculum-Based Programs* (Kirby et al., 2011), and other resources related to using effective pedagogical methods to support healthy adolescent decision making.

The Gender Matters BDI logic model can be found in Appendix 1 (At-a-Glance Version) and Appendix 2 (Comprehensive Version). More detailed information about the links between learning activities and determinants can be found on pages 8–13 of the Gen.M curriculum and in Gender Matters Core Components (page 27).

THE IMPORTANCE OF GENDER IN ADOLESCENT SEXUAL DECISION MAKING

What Is Gender?

EngenderHealth defines gender as a “socially determined construct describing the characteristics, behaviors, and roles deemed appropriate and expected of men and women (and boys and girls) by a given society.” These characteristics, behaviors, and roles are learned and reinforced through a socialization process that begins early in life and continues throughout the life cycle. “Gender” is different from “sex.” “Sex” is based on our biology (i.e., chromosomes, internal and external reproductive organs, hormones, and certain physical characteristics). People are born male or female (or, in some cases, with a combination of male and female biological markers), but they are conditioned to be, or feel themselves to be, “feminine” or “masculine.”

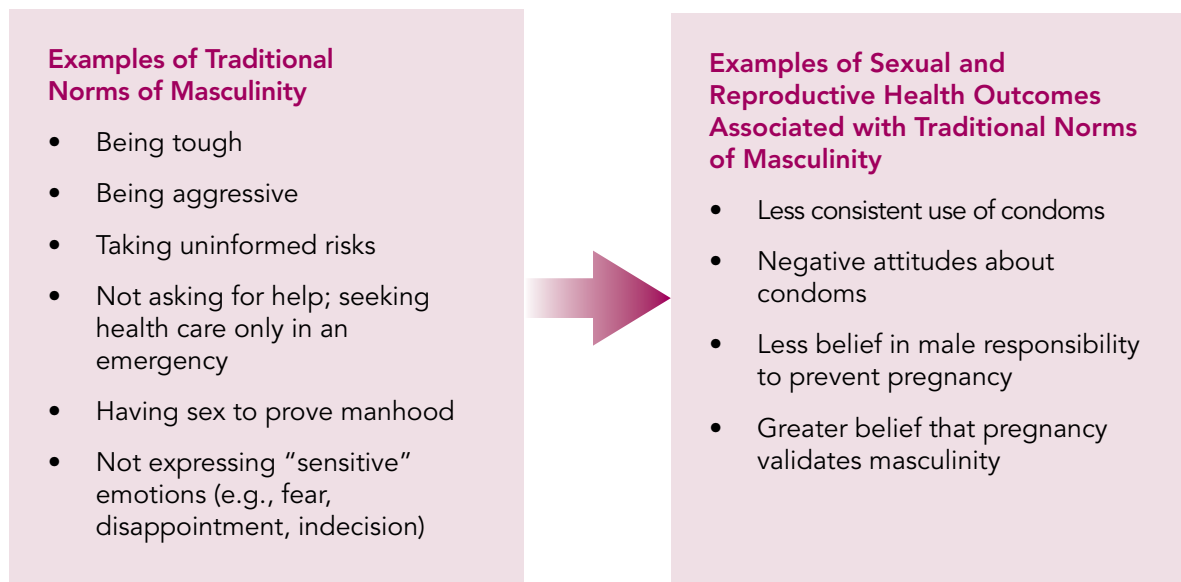
Despite the compelling evidence that young men and women are made vulnerable by gendered attitudes and behaviors, only a few teen pregnancy and STI prevention programs in the United States have addressed this key determinant in a significant way. EngenderHealth brings two decades of experience in successfully using a gender-transformative approach to develop and evaluate reproductive and sexual health programs in the United States and the developing world. Many of its experiences and lessons learned were applied during the development of Gender Matters.

What Is Masculinity?

In many parts of the United States, societal norms about being a man include being tough, brave, and aggressive; taking risks; not asking for help; and using sex to prove one’s manhood. These behavioral and attitudinal norms are often quite rigid; men are expected to follow them all of the time, and they are often interpreted to an extreme. For example, “being tough” can be a positive quality for both men and women. However, there are different ways of expressing one’s toughness, ranging from running a marathon to using a gun to resolve a conflict (an extreme). Some expressions of toughness are healthy, some are unhealthy. When traditional views of masculinity are rigidly enforced, they have serious implications for preventing sexual risk-taking behaviors, pregnancy, and STIs (see Figure 2, page 14).

Research conducted in both the United States and abroad shows clear associations between traditional norms of masculinity and teen pregnancy/STIs. For example, adolescent males who hold traditional attitudes toward masculinity report less consistent use of condoms, less belief in male responsibility to prevent pregnancy, and greater belief that pregnancy validates masculinity (Pleck, Sonenstein, & Ku, 1993). Social constructions of masculinity also deter men from accessing health care (Courtenay, 2000), which helps explain why men often make substantially fewer health care visits than women (Kandrack, Grant, & Segall, 1991).

Figure 2: Linking Traditional Norms of Masculinity to Negative Health Outcomes



What Is Femininity?

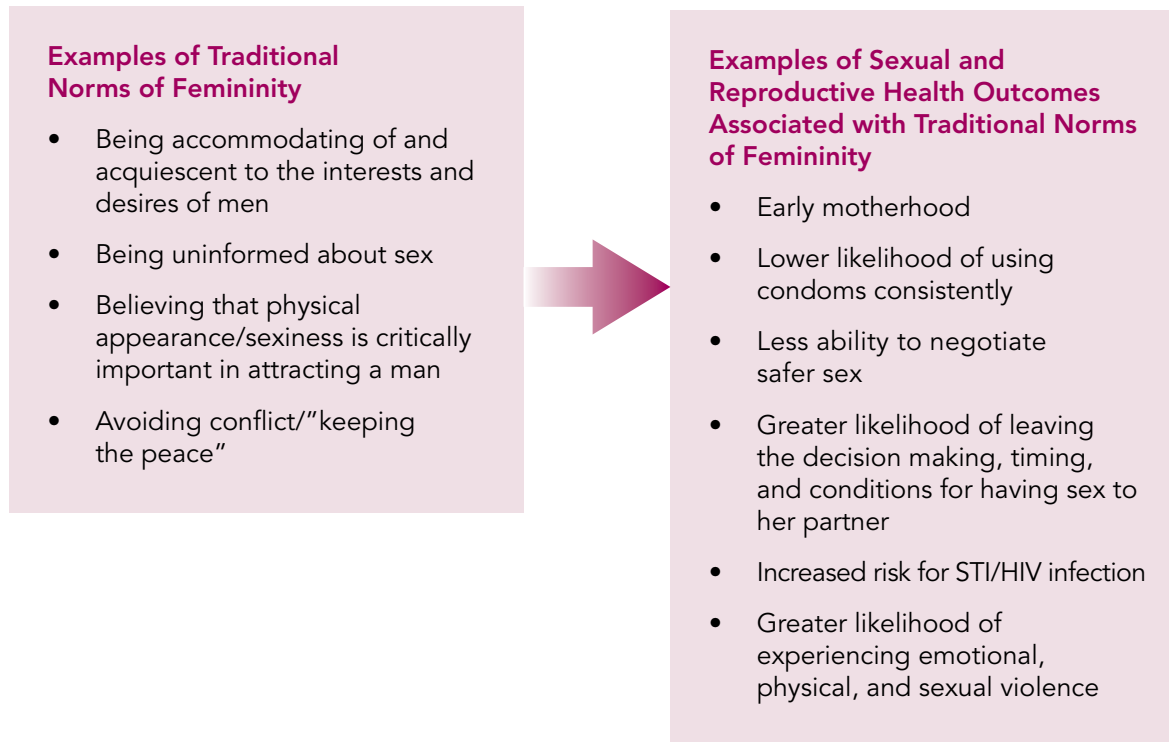
Gender constructions for young women also influence the risk for teenage pregnancy. For women, traditional constructions of femininity are often characterized by accommodating the interests and desires of men (Connell, 1987). This concept, termed acquiescent femininity, is complicit with harmful constructions of masculinity and encourages resonance, rather than dissonance, with these male norms (Jewkes & Morrell, 2010). Acquiescent femininity often leads women to be passive and uninformed about sexuality—simply waiting for men to propose sex, and then acquiescing. Research in the United States has shown that young women whose gender ideology is relatively traditional have a lower age at motherhood compared with those whose gender ideology is less traditional (Stewart, 2003). Studies also have found that power imbalances experienced by women in heterosexual relationships reduce consistent condom use and increase their risk for HIV infection (Ickovics & Rodin, 1992).

When power imbalances between men and women are more extreme, violence against women is more likely to occur. Research has shown that women who experience gender-

based violence are more likely to experience unintended pregnancy (Heise, Ellsberg, & Gottemoeller, 1999).

Figure 3 offers more examples of the link between traditional norms of femininity and negative health outcomes.

Figure 3: Linking Traditional Norms of Femininity to Negative Health Outcomes



THE BEHAVIOR CHANGE THEORIES INFORMING GENDER MATTERS

After the development team identified the teen sexual behaviors that would be addressed by the Gender Matters program (Step 2 of the BDI logic model process), the team selected and prioritized a list of psychosocial determinants that influence those behaviors (see Appendix 1). This list of determinants helped the team to answer questions like: How can we explain why some teens wait to have sex until they are older while others begin to have sex at an early age? Why do some teens use condoms and others do not? Why do some teens feel comfortable visiting a health care center for contraception and others do not?

In addition to reviewing research literature on adolescent sexual risk and protective factors and local formative assessment data, the team identified several health behavior change and education theories to help guide the selection of determinants. These theories and

approaches are described briefly below. Understanding the theories that ground Gender Matters can help program administrators and facilitators understand the purpose, intention, and logic behind each of the program's activities.

Social Cognitive Theory³

Social cognitive theory, first described by Albert Bandura, explains human behavior in terms of a continuous reciprocal interaction among cognitive, behavioral, and environmental determinants. Specifically, social cognitive theory focuses on addressing six key determinants of behavior:

- Expectations (people's beliefs about the likely results of their actions)
- Observational learning (people's beliefs based on observing others like themselves and/or the visible physical results of desired behavior)
- Behavioral capability (the knowledge and skills needed to influence behavior)
- Self-efficacy (confidence in our ability to take action and persist in action)
- Reciprocal determinism (bi-directional behavior changes resulting from interaction between people and the environment)
- Reinforcement (responses to people's behavior that increase or decrease the chances of recurrence)

One example of how social cognitive theory is applied in the Gen.M curriculum is in the use of role plays to practice skills. For example, in learning about refusal skills, youth have an opportunity to increase their behavioral capability by discussing skill steps, self-efficacy by practicing and mastering the skills, and reinforcement by the feedback they receive from peers and facilitators.

The Theory of Reasoned Action⁴

The theory of reasoned action, developed by Martin Fishbein and later revised by Fishbein and Icek Azjen, is a behavior change theory that focuses on a person's intention to behave in a certain way. An intention is a plan or a likelihood that someone will behave in a particular way in specific situations (regardless of whether they actually do so). The theory of reasoned action aims to influence a person's attitudes toward that behavior, as well as the subjective norms of influential people and groups who could influence those attitudes. According to this theory, attitudes and norms are the main influences on intention, which, in turn, is the main motivator of behavior.

³ This description of social cognitive theory is adapted from: Social Learning Theories—Resource Adolescent Pregnancy Prevention, accessed at: <http://recapp.etr.org/recapp/index.cfm?fuseaction=pages.TheoriesDetail&PageID=380>.

⁴ This description of the theory of reasoned action is adapted from: Theory of Reasoned Action (TRA)—Resource Center for Adolescent Pregnancy Prevention, accessed at: <http://recapp.etr.org/recapp/index.cfm?fuseaction=pages.TheoriesDetail&PageID=517>.

One example of how theory of reasoned action is applied in Gender Matters is having the youth think about ways they intend to change unhealthy behaviors or sustain healthy behaviors and how they will avoid risky sexual behaviors in the future. Participants are videotaped on the last day of the workshop making their commitments, which are then shared through social media, to remind them of their commitments.

Gender-Transformative Programming Approach

A gender-transformative programming approach aims to accomplish three tasks: 1) raise awareness about gender norms, 2) question the costs associated with abiding by harmful gender norms, and 3) redefine harmful gender norms into healthy and equitable ones (Rolleri, 2014). The most effective gender-transformative programs are gender-synchronized; that is, they engage both men and women (or boys and girls) during the learning/transformation process (Greene & Levack, 2010). Gender-transformative programs often take an ecological approach by addressing the multiple forces in a person's environment that influence gender norms (e.g., family, school, workplace, health care centers, media laws/policies, etc.).

Fuzzy-Trace Theory

Fuzzy-trace theory is a theory of cognition that helps explain how individuals process information and then use that processed information to reason and make decisions (Reyna & Brainerd, 1995). The Gen.M curriculum places a strong emphasis on reinforcing key messages about healthy sexual behavior and attitudes. It does this by repeating six core messages in the Gender Matters Code and by having facilitators make two or three statements at the end of every curriculum activity that synthesize the key messages from the learning that just occurred. By doing so, the curriculum aims to leave youth with gist traces (i.e., memories of bottom-line meanings) of desirable choices that they can access cognitively when making important decisions about relationships and sex.

Key messages are also reinforced by the final activity in each of Gen.M's five sessions, in which youth discuss the key takeaway messages in their own words while also being video-recorded. These video recordings are then shared on the group's private Facebook page to further reinforce the messaging.

Cognitive Dissonance

Cognitive dissonance is a distressing feeling (e.g., conflict or anxiety) resulting from a discrepancy between one's beliefs and one's actions (Festinger, 1985). To resolve dissonance, one may look at changing either the behavior or the belief, so that they become consistent with each other. The hope is that when youth state key learnings/messages at the end of each Gen.M session, they will behave accordingly to avoid the discomfort of cognitive dissonance.

Social Norms Approach

Social norms are standards of acceptable behavior or attitudes within one's reference group (e.g., group of friends, neighborhood, community). There are two types of social norms—actual norms and perceived norms. Actual norms are the true social norms for a particular attitude or behavior. Perceived norms are what someone believes to be the norm for a group. One's perception of a social norm does not always reflect an actual norm. An opportunity to change perceived norms can arise when the reality of actual norms is uncovered. When people see that their perceived norms are not accurate, they will tend to change in order to fit in with the majority (Berkowitz, 2005; Fishbein & Ajzen, 1975). This is especially true for teens. In Gen.M, teens have multiple opportunities to witness their peers discussing the reality of sexual behaviors, as well as talking about and practicing prosocial skills and attitudes.

WHAT WE LEARNED FROM THE FORMATIVE ASSESSMENT

EngenderHealth and Columbia University's Mailman School of Public Health led formative assessment activities associated with the development of Gender Matters. These formative data were critically important in developing curriculum activities, as well as the baseline questionnaires that would be used in the outcome evaluation.

Formative Assessment Study Goals

Formative assessment activities began in Spring 2011 and ended in Fall 2012. The formative study had two primary goals:

1. To ascertain the baseline knowledge and/or attitudes that teens had regarding gender roles, teen pregnancy, and sexual health services in Austin, Texas
2. To probe their lived experiences with gender roles within relationships, with a special lens on the sexual aspects of those relationships

Three Formative Data Studies

Three formative data studies using a mixed-method combination of quantitative (survey) and qualitative (in-depth interviews and focus groups) data collection methods were conducted during the period of Spring 2011 to Fall 2012. All data instruments were developed by Columbia University with input from EngenderHealth. All of the formative research studies were reviewed and approved by the Columbia University Institutional Review Board.

A description of the study samples and data collection methods of each of the three studies is found in Table 1.

Table 1: Gender Matters Formative Assessment Studies

	Study 1 Surveys and Focus Groups	Study 2 In-Person Interviews	Study 3 Telephone Interviews
Date	Spring 2011	Summer 2011	Fall 2012
Sample	40 Latino and African American adolescents aged 14–17 (18 boys and 22 girls) recruited from Safe Place	44 Latino and African American female adolescents aged 14–16 recruited from the 2011 Summer Youth Employment Program	15 Latino and African American female adolescents aged 14–16 who had completed the pilot of Gender Matters in Summer 2011
Data Collection Methods	All participants completed a short survey questionnaire and participated in a focus group discussion (two all-boy groups, two all-girl groups, and one mixed-sex group).	All participants completed a face-to-face in-depth interview.	All participants completed a 20–30 minute interview by phone.

Findings from Formative Studies and Application

Findings from the three formative assessment studies fell into three topic areas: 1) male and female gender norms and attitudes; 2) pregnancy attitudes; and 3) knowledge about sexual and reproductive health services. The following is a brief description of the findings associated with each of these topic areas, as well as how the Gender Matters development team applied the findings.

Topic 1: Male and Female Gender Norms and Attitudes

Males. Both survey and focus group data indicated that the social environment in which youth lived was dominated by a traditional conception of masculinity. For example, half of male respondents agreed, or strongly agreed, that boys “get their way” in relationships. Moreover, in the focus groups, both boys and girls noted that, in general, boys prioritized sex over emotional connection in relationships. They went on to describe how boys often did what they deemed necessary to convince girls to have sex. Boys were frequently referred to as “players,” “lying,” and “two-faced.” Finally, both boys and girls mentioned the pressure boys experience to have sex or to “appear to be having sex,” to prove one’s masculinity and avoid the specter of being thought homosexual.

Females. Findings regarding the female gender script were mixed. Survey data indicated that overall, many female respondents reported nontraditional gender attitudes regarding their need for a boyfriend and how they would respond to an imaginary scenario where a boy tried to get them to have sex. The one exception was that they tended to believe that girls, not boys, were primarily responsible for preventing pregnancy. The focus groups and in-depth interviews underscored a more textured and complicated picture of these attitudes.

The girls' qualitative data reflected a pattern of gender beliefs characterized by holding more nontraditional beliefs at the individual level, within a social context of very traditional scripts. For example, girls reported that they would resist pressure from boys to have sex; they would recognize when boys were being dishonest and respond assertively. These reports were then contrasted to the behavior of the girls around them, who acquiesced to the pressure for sex in order to have or keep a boyfriend or to demonstrate that they "loved" the boy.

Despite their asserted nontraditional female gender beliefs, the qualitative data showed that girls actively policed the gender behaviors of other girls by negatively sanctioning nontraditional behavior. For example, in the first five in-depth interviews, the girls spontaneously talked about other girls being "sluts" and/or "hos." These labels were applied to girls who deviated from traditional gender norms in the relationship/sexual arena (i.e., had too many boyfriends/sexual partners, had sex with a boy too soon in the relationship, flirted with boys, and dressed in a revealing fashion).

The sanctioning for such transgressions involved: being labeled a slut/ho; being socially isolated, being the subject of gossip and rumors, and having peers treat you poorly. While most of the girls supported the slut/ho narrative, a few girls questioned it by noting the implicit double standard upon which it rested. They believed that having sex with different people should be socially acceptable for everyone or for no one, but should not be differentially evaluated based on gender.

The formative data presented above echoed data that the Gender Matters development team gleaned from reviewing literature on male and female gender norms. The team used these data to develop all of Session 1: Understanding Gender of the Gen.M curriculum and to integrate critical thinking questions about gender throughout the curriculum's five sessions, as well as in social media activities.

Topic 2: Pregnancy Attitudes

Survey data indicated that attitudes toward teen pregnancy were more positive among teens than was anticipated. For example, 41% of girls and 33% of boys disagreed with the statement "Getting pregnant would make me unhappy." This attitude differed by race/ethnicity; far more Latino than African American respondents (50% vs. 24%) disagreed with this statement. These findings, along with the fact that 21% of Latinas versus 12%

of African American females disagreed with the statement that their parents “would be unhappy if she got pregnant” indicate that the Latino respondents may live within a more pronatalist context than the African American respondents.

Qualitative interviews provided a more nuanced picture of teen pregnancy attitudes. Girls’ reflections on teen pregnancy were quite negative, with repeated references to its undesirable consequences and to their intentions to avoid becoming pregnant as a teen. It is important to note that many of the youth interviewed lived in economically disadvantaged communities with a higher-than-average prevalence of early childbearing. The pervasiveness of teen pregnancy within the families and peer groups of respondents supported their negative pregnancy attitudes by providing real-life exposure to the difficulties of raising a child, as well as to messages received from many surrounding them to “avoid making the same mistake they did.”

However, the pervasive exposure to teen pregnancy also provides girls with evidence that life does not end if you have an early pregnancy and that families created in this manner can still be close and loving. So while teen pregnancy may be undesired, it is a familiar, and in that sense, perhaps a safe outcome.

The mixed set of findings concerning pregnancy attitudes underscored the need to develop learning activities that explore and clarify teens’ attitudes toward teen pregnancy. The development team designed Gen.M’s Session 3: Big Decisions to include activities that encourage both affective and cognitive learning on the subject of teen pregnancy and parenting. The activities challenge participants to think outside of their present realities and reflect on the changes that pregnancy would bring to their current social, economic, physical, educational, and familial contexts. Further, they are challenged to examine how these changes would feel, both personally and relationally. Though the activities are not necessarily able to impact the social and economic contexts in which the participants currently live, the exercises challenge participants to look beyond their current situations to engage with new realities, and in doing so, better grapple with the tangible and emotional consequences of teenage pregnancy.

Topic 3: Knowledge about Sexual and Reproductive Health Services

Many of the youth participating in the formative studies did not know where to go to get birth control or STI services. More than half of youth were concerned about paying for services, and more than one-third believed incorrectly that they needed parental consent to access services.

The Gender Matters development team used these data in designing Session 5: Taking Action to Prevent Teen Pregnancy, especially in Activity 5.2: Birth Control Report and Activity 5.3: The Clinic.

WHAT WE LEARNED FROM THE GENDER MATTERS PILOT

Gender Matters underwent a pilot implementation in Summer 2011. This pilot's purpose was threefold: 1) to gain feedback on the intervention curriculum; 2) to examine the relationship dynamics between implementing partners EngenderHealth and SafePlace; and 3) to assess how youth experienced this intervention. Pilot analyses used data from surveys and focus groups with Gender Matters youth participants and interviews with facilitators following program implementation. Feedback from youth and facilitators on curriculum activities, training, and fidelity are detailed below.

Youth Feedback

Overall, youth feedback on the program was overwhelmingly positive, and surveys revealed that participants were very satisfied with their Gender Matters experience. During focus group conversations, participants stated that they enjoyed the directness and honesty exhibited by the facilitators, especially when discussing sex, STIs, and anatomy. They also valued the opportunity to talk about their gendered experiences, as they often do not get to talk about gender, relationships, and societal expectations in their everyday lives.

Youth indicated that they wanted to engage in more activities and spend less time in lecture-based discussion. Many of the students found it difficult to focus for the four hours of Gender Matters programming after having already participated in four hours of their summer job through the Summer Youth Employment Program; they suggested including more movement, kinesthetic activities, and longer breaks to better maintain their attention.

To address this feedback, EngenderHealth modified several curriculum activities to be more interactive. Some examples of these improvements included: engaging in a simulated phone call to a health clinic, and allowing youth to pick from a random “grab bag” of platforms to present a key concept from the day (i.e., deal-breakers, healthy communication, etc.). Additionally, EngenderHealth staff met with facilitators from SafePlace to gather input on how to make key activities more engaging and interactive for youth.

EngenderHealth and the Summer Youth Employment Program also altered the implementation schedule for subsequent years, so that youth would not have to participate in both their job and Gender Matters on the same day. The following years, youth worked their usual five-day work week for five weeks, with a randomly selected group of participants invited back for a sixth week consisting of just Gender Matters.

Lastly, youth stated that role plays were not realistic to youth culture, reading as if adults had written them; they suggested the addition of more familiar language and colloquialisms suitable for their age. EngenderHealth provided the role plays to an organization that works with youth, called Changing Lives Youth Theatre Ensemble, to help rewrite the scripts to be more realistic, youth-driven, and relatable. EngenderHealth also worked with the facilitators to make greater use of skits, to make the material more “alive” and to keep participants actively engaged. In some cases, activities were rewritten to allow participants

to act out how they would handle certain situations (as opposed to writing down their thoughts, as originally recommended in the curriculum). For example, in one session, participants produced a talk show, during which a “host” provided advice to different “guests” on how to make sexual decisions. In another session, participants created a public service announcement, during which they provided information about recognizing and dealing with unhealthy behavior.

Facilitator Feedback

Training

Although all facilitators completed a 40-hour, week-long curriculum training, interviews with facilitators revealed that they did not feel fully prepared to implement the program. Facilitators wanted more practice opportunities than were available during the five-day training period and reported that it would have been easier to implement Gen.M if the training had included the modeling of all curriculum activities. Facilitators also stated that the objectives of the training were not clearly stated beforehand and that it felt confusing to model certain activities and then discuss how they could be improved.

Fidelity

Implementing a prescribed curriculum with fidelity was largely unfamiliar and uncomfortable territory for facilitators. This is because many of the facilitators are encouraged to develop their own activities and run their own support groups, and they interpreted maintaining fidelity as reading word-for-word from a curriculum. Facilitators perceived that they were unable to insert their own interpretations of the curriculum messaging and felt uncomfortable about being monitored by EngenderHealth staff. This revealed large discrepancies between how EngenderHealth and SafePlace implement programming. EngenderHealth observes staff to ensure that programs are implemented with fidelity, while SafePlace does not regularly observe staff members’ interactions with youth and encourages its team members to create their own activities and discussion topics, based on youths’ needs and interests.

Due to these divergent practices and the facilitators’ initial discomfort, EngenderHealth reworked the original curriculum sequence, shifting the placement of several activities to improve the flow of the curriculum, as well as the facilitators’ and participants’ comfort. EngenderHealth also eased the emphasis on strict interpretation of fidelity and allowed facilitators to make some adaptations to the curriculum, including modifications for age and culture (such as by changing names used in role plays, adding or modifying icebreakers, and altering the language used to explain concepts). Facilitators were also encouraged to substitute or modify certain activities, such as icebreakers, provided that EngenderHealth agreed that they covered the same topics as the activities that were replaced or modified and emphasized the key messages. All modifications were documented systematically in fidelity log forms and program observation log forms.

Once EngenderHealth revised fidelity expectations and rearranged curriculum activities, facilitators felt more confident in their ability to successfully deliver the program. Also, most of the facilitators felt markedly less anxious after the first implementation cycle. The combination of the curriculum changes and the opportunity for facilitators to implement the pilot enabled them to be less concerned about following the curriculum verbatim and more focused on drawing out the key program themes and messages.

Lessons Learned

Administering a pilot of Gender Matters was important in revealing which curriculum activities worked, how to best tailor training to facilitators' needs, and how to monitor program fidelity. One of the most important lessons learned was how to effectively work with an organization with a differing implementation style and organizational focus. Through the pilot process, EngenderHealth and SafePlace discovered how to better work collaboratively to address facilitator and youth feedback to enhance program efficacy. The pilot also allowed facilitators to practice new skills learned from training and become familiar with the program. Ultimately, the pilot implementation provided a unique opportunity to work through implementation and curriculum issues prior to full program roll-out the following year.

KEY TAKEAWAY POINTS

The Gender Matters Program Implementation and Adaptation Manual is designed to support anyone involved with implementing the Gender Matters program and has multiple uses.

1. Gender Matters comprises three complementary components: 1) a 20-hour Gen.M curriculum; 2) a social media campaign; and 3) youth-generated video messages about gender, relationships, sexual decision making, and prevention of pregnancy and STIs.
2. Core to all three Gender Matters components is exploring how inequitable and unhealthy gender norms affect adolescent sexual decision making. Gender is an important theme that runs throughout all Gender Matters activities and is a key element of the program's theory of change.
3. Gender Matters has several unique features, including: 1) addressing gender norms as an important determinant of sexual risk behavior; 2) reinforcing key messages via social media and youth-generated video messages; 3) working with youth participating in a summer youth employment program; and 4) bridging the fields of teen pregnancy prevention and intimate partner violence.

4. The Gender Matters development team chose a theory-of-change logic model known as the Behavior-Determinant-Intervention (BDI) logic model to map and design the Gender Matters program. The logic model was also an important tool for developing process and outcome evaluation activities.
5. There are four major steps in building a BDI logic model: 1) identify a health goal; 2) select the behaviors that are directly related to that health goal; 3) select determinants that influence those behaviors; and 4) develop intervention activities that will deliberately change determinants.
6. Gender is a socially determined construct describing the characteristics, behaviors, and roles deemed appropriate and expected of men and women (and boys and girls) by a given society.
7. When men and women (or boys and girls) abide by rigid gender norms, they are more likely to engage in sexual risk behavior and experience unintended pregnancy and STIs.
8. The Gender Matters formative assessment study had two primary goals:
 - To ascertain teens' baseline knowledge and/or attitudes regarding: gender roles, teen pregnancy, and sexual health services in Austin, Texas
 - To probe their lived experiences with gender roles within boy-girl relationships, with a special lens on the sexual aspects of those relationships
9. Several health behavior change theories were used to inform the development of Gender Matters, including: 1) social cognitive theory; 2) the theory of reasoned action; 3) a gender-transformative programming approach; 4) fuzzy trace theory; 5) cognitive dissonance; and 6) a social norms approach.



SECTION 2

GENDER MATTERS CORE COMPONENTS



INTRODUCTION

This section of the Gender Matters Program Implementation and Adaptation Manual presents detailed descriptions of Gender Matters core content and pedagogical and implementation components. The descriptions and resources described here are designed to clarify for curriculum facilitators and administrators how Gender Matters was developed, its structure, its approaches, and the intention and purpose of its activities. In combination with the following section, titled Making Adaptations to Gender Matters (page 79), this section can be used to make informed and strategic adaptations to Gender Matters. Facilitators are encouraged to review both sections and use them as a guide for implementing the Gen.M curriculum with fidelity.

Note that only Component 1 (the 20-hour curriculum) and Component 3 (the youth-generated video messages) of the Gender Matters program are considered core components of the program. Although Component 2 (social media) is not considered essential to the program's effectiveness, social media activities can help reinforce curriculum messages, connect students to resources, and promote dialogue.

During the initial study, participation in social media activities was not as active as expected. As such, the development team cannot say with confidence that the social media component was essential to the intervention's effectiveness. One possible explanation as to why youth did not participate as actively as was anticipated is that participating youth did not come from an existing community of youth (e.g., an after-school program, a school classroom). Attempting to use a social media format like Facebook may not be an effective means to create a sense of community with youth who had not known each other prior to participating in the program. Results might differ with a group of youth who already know each other.

Specifically, in this section of the Gender Matters Program Implementation and Adaptation Manual, you will find:

- Definitions of key terms
- The Gender Matters core content components
- The Gender Matters core pedagogical components
- The Gender Matters core implementation components

DEFINITIONS OF KEY TERMS

The following definitions of key terms related to Gender Matters core components are based on a typology developed by the Division of Reproductive Health at the Centers for Disease Control and Prevention (CDC) (Rolleri et al., 2014) specifically for adolescent reproductive health professionals working with an evidence-based curriculum⁵ aimed at preventing teen pregnancy, HIV, and other STIs.

CORE COMPONENTS

Core components⁶ are the essential, interrelated activities and approaches of a curriculum that ensure the curriculum's effectiveness. A curriculum's core components can be broken into three categories: 1) core content components; 2) core pedagogical components; and 3) core implementation components.

Core Content Components

Core content components are the essential parts of a program that relate to what is being taught. Core content components align closely with the psychosocial determinants (e.g., knowledge about condoms, attitudes about abstinence, communication skills, etc.) that are prioritized by the curriculum's theory of change. Gen.M's Theory-of-Change Logic Model can be found in Appendix 1 (At-a-Glance Version, page 101) and Appendix 2 (Comprehensive Version, page 104).

Core Pedagogical Components

Core pedagogical components are the essential parts of a program that relate to how its content is taught for it to be effective (e.g., brief lectures, small-group work, role plays, etc.). For example, role-playing is considered one of the best pedagogical methods for teaching skill and self-efficacy to refuse unwanted or unprotected sex.

What does pedagogy mean?

Pedagogy is the science and art of teaching. A curriculum's pedagogy refers to the methods, strategies, and techniques facilitators use to effectively transmit knowledge, values, and skills to learners.

⁵ An effective evidence-based intervention is one that has undergone a rigorous evaluation using an experimental or quasi-experimental design with a large enough sample of participants. Participants are typically followed over 6–12 months, and sound data analysis methods are used. The intervention is considered effective if a rigorous evaluation demonstrates that significant changes occurred in teen pregnancy, STI incidence, and/or sexual behavior (e.g., increased use of condoms).

⁶ A note of clarification: There are three “components” (e.g., pieces or parts) to the Gender Matters intervention. There are also three types of core “components” (content, pedagogical and implementation) that relate to the essential elements of the program responsible for its effectiveness. The use of the word “component” is distinct for each description.

A brief lecture alone on refusal skills would be unlikely to change skill or self-efficacy (Kirby, 2007). The pedagogical methods for addressing the prioritized determinants in Gen.M were deliberately chosen based on pedagogical research related to effective sexuality education curricula.

Core Implementation Components

Core implementation components are the essential logistical elements of a program that contribute to a conducive learning environment. These may include program setting, youth demographics, facilitator-to-youth ratio, and the dosage and sequence of sessions.

FIDELITY

Fidelity is the faithfulness with which a curriculum or program is implemented—that is, how well the program is implemented without compromising core components essential for the program’s effectiveness (ETR Associates & CDC, 2012).

ADAPTATION

Adaptation is the process of making changes to an evidence-based program to increase its suitability for a particular population and/or for an organization’s capacity, without compromising fidelity (ETR Associates & CDC, 2012).

GEN.M'S CORE CONTENT COMPONENTS

INTRODUCTION

Gen.M curriculum activities are each designed to address one or more of the psychosocial determinants associated with changing teen sexual behavior (see box). These determinants were selected based on adolescent reproductive health research, formative assessment data, and guiding theories of health behavior change. The determinants selected for the Gen.M program align closely with the curriculum's core content components.

Each of these key determinants⁷, along with their definitions, is listed below. A summary of the determinants addressed in each Gen.M session is found in Appendix 3: Gen.M Determinant Analysis, by Session.

For a more comprehensive look at how the Gen.M curriculum's learning activities map to Gen.M's determinants, refer to the illustrations of Gen.M's Theory of Change Logic Model found in Appendixes 1 and 2.

Sexual Behaviors Addressed in Gender Matters

For youth who are not sexually active:

1. Delay the onset of sexual intercourse

For youth who are sexually active:

2. Increase use of the most effective contraceptive methods, including hormonal contraception and the IUD
3. Increase consistent and correct use of condoms

DETERMINANTS⁸

Knowledge

Knowledge refers to the awareness and understanding of information, statistics, facts, principles, frameworks, characteristics/descriptions, causes, and consequences related to a particular public health problem (e.g., unintended pregnancy or STI/HIV infection). Knowledge is foundational, but generally not sufficient, for behavior change. For example, a teen might know how condoms work, the steps to using them correctly, and where to get

⁷ Psychosocial determinants are the risk and protective factors that influence a teen's behavior. In Gender Matters, we prioritize cognitive and emotional factors (i.e., knowledge, attitudes, and self-efficacy) and social factors (i.e., peer norms).

⁸ All of the following key determinants are adapted from: Kirby et al., 2011.

them. But if the same teen also has a negative attitude about using condoms and a lack of skills and self-efficacy to use them, it is unlikely that his or her condom use behavior will change.

Knowledge determinants found in Gen.M include knowledge about:

- Gender norms and how they affect health
- Gender norms and how they affect relationships
- Gender norms and how they affect sexual decision making
- How the media affect the development of gender norms
- The characteristics of healthy and unhealthy relationships
- Communication styles
- Consent and its importance
- Acceptable and unacceptable reasons to have sex
- Setting and respecting personal limits
- The male and female reproductive systems
- How a pregnancy occurs
- STI transmission, symptoms, testing, treatment, and prevention
- The benefits of condoms
- Contraceptive methods
- Clinic services for sexual and reproductive health

Attitudes

Attitudes are positive or negative evaluations that people have toward other people, objects, activities, ideas, etc. They demonstrate our opinions, dispositions, perspectives, or positions on a particular topic. For example, people are likely to have attitudes about a variety of things, including exercise, doing chores, having sex, etc. People who have a positive attitude toward some behavior are more likely to engage in that behavior, and those with negative attitudes are less likely to do so. Attitudes have two components: 1) a cognitive component, which includes one's beliefs about something (e.g., condoms reduce the chance of HIV transmission), and 2) an affective component, which includes one's evaluation of the same thing encompassing likes and dislikes or favorable and unfavorable views (e.g., I believe that condoms prevent HIV transmission, but I don't like the way they feel).

Beliefs

A belief is an individual's perception that a proposition or premise is true. Beliefs differ from attitudes, in that they do not have an affective component. For example, someone can believe that hormonal contraceptives are a very effective method of birth control. An attitude would be expressed as “I really like being on the pill because it is effective and I don't have to worry about becoming pregnant.”

Values

Values are what we consider to be important and valuable. They serve as guidelines in helping us make decisions about behaviors or life choices. They reflect what we perceive about the “rightness” or the “wrongness” of things. We generally feel good when we behave in accordance with our values. Examples of values include: health, avoiding STIs/HIV, waiting to have sex until ready for parenthood, marrying or not marrying, education, fairness, etc.

Attitudes, beliefs, and values determinants found in Gen.M include:

- Healthy and equitable values and attitudes about gender
- Empathy toward others' gendered experiences
- Positive attitudes about knowing and acting against deal-breakers
- Positive attitudes about alternatives to sex
- Positive attitudes about using condoms
- Positive attitudes about using contraception
- Positive attitudes about visiting an SRH clinic

Peer Norms

Peer norms are acceptable standards for behavior or attitudes within a community or peer group. There are two types of peer norms—actual norms and perceived norms. Actual norms are the true social norms for a particular attitude or behavior. For example, if the majority of a group of sexually active individuals use some form of birth control, then the actual norm for the group is to use birth control, and going without birth control is “nonnormative” in that group. Perceived norms are what someone believes to be the norm for a group. If, for example, a young man believes that most of his peers do not use condoms, for that young man, the perceived norm is nonuse of condoms.

Often, teens' perceptions of peer norms do not always reflect actual norms. For example, some teens may believe that many of their peers are having sex, when in reality just a few may be having sex. When actual norms reflect healthy behaviors and perceptions of peer norms reflect unhealthy behaviors, uncovering reality presents an opportunity to change perceived norms. By doing so, we can encourage healthy behavior, because teens (not unlike many adults) often want to fit into the majority.

Peer norms determinants found in Gen.M curriculum include healthy and equitable peer norms about gender and positive peer norms about:

- Supporting healthy relationships
- Refusing unwanted sex
- The desirability of preventing pregnancy during adolescence (resolving ambivalence)
- Acceptable reasons to have sex
- Waiting to have sex
- Healthy alternatives to sex
- Resisting pressure to have sex
- Avoiding pressuring others to have sex
- Accepting a partner's refusal to have sex
- Using condoms
- Visiting a clinic for sexual and reproductive health services

Skills

Skills refer to the ability to do something well (e.g., to use a condom correctly, to refuse sex, or to negotiate condom use with a partner). Skills are developed by practice. Having the skill to do something assumes that a person understands the correct steps required to execute an action and knows how to execute the steps. However, knowing how to do something does not mean that a person will behave or act in the desired way in a real-life situation (see the definition for “self-efficacy” below).

Self-Efficacy

Self-efficacy is a person's confidence in his or her ability to perform particular behaviors well enough to control events that affect his or her life. People with high self-efficacy believe that they can perform behaviors well enough to change their environment and achieve a goal, and as a result they have more confidence. They are then more likely to try to perform the behavior or achieve a goal again. Conversely, people with low self-efficacy believe that they cannot achieve a goal, have less confidence, and are less likely to try. Self-efficacy is developed through skill practice, mastery of skills, and positive reinforcement (internal and external).

Skill and self-efficacy determinants found in Gen.M include skills and self-efficacy for:

- Confronting deal-breakers in relationships
- Refusing unwanted sex
- Obtaining consent
- Accepting refusal of sex
- Using condoms
- Negotiating condom use with a partner
- Calling a sexual and reproductive health clinic

Perception of Risk

Perception of risk is an individual's understanding and belief about the likelihood that he or she could experience negative consequences, such as experiencing an unintended pregnancy or contracting an STI, by engaging or not engaging in certain behaviors (e.g., having sex with a condom, having sex without a condom). Perception of risk encompasses awareness of one's susceptibility or vulnerability to some possible health outcome, its severity, and its seriousness.

Perception of risk determinants found in Gen.M include increased perception of:

- Risk of pregnancy
- Severity of pregnancy during adolescence

Intentions

An intention is a decision, determination, or plan to behave in a particular way in specific situations. If a person intends to behave in a certain way, he or she is more likely to actually behave in that way, but it is not a guarantee. The extent to which an intention translates into actual behavior typically depends on the strength of the intention, the skills or capability of the individual to implement his intention, and the available environmental or peer supports for the intention.

Intention determinants found in Gen.M include the intention to:

- Stick to personal limits
- Prevent pregnancy

GEN.M'S CORE PEDAGOGICAL COMPONENTS

Table 2 presents each of Gen.M's core pedagogical components, along with a justification and examples from the curriculum. The table is a useful tool for preparing to implement the Gen.M curriculum and can help your project team better understand the reasoning behind the teaching methods, as well as the facilitation skills and comfort level facilitators will need to implement Gen.M most effectively, and ultimately with greater fidelity.

In Appendix 3, you will find a list of all pedagogical methods in Gen.M and the frequency of their use.

Table 2: Gender Matters Core Pedagogical Components

Core Pedagogical Components	Justification	Curriculum Examples
Giving a Clear Program Introduction	<p>The introduction to the Gen.M curriculum should include group introductions, ground rules, and a program overview.</p> <p>The introduction sets the tone for behavioral and learning expectations and creates a safe social environment for asking questions and participating in activities.</p>	1.1: Welcome and Overview
Giving Clear Directions	<p>Directions for interactive activities must be clear and succinct, to ensure that the activity will be carried out correctly and as intended. When participants are not clear about what is expected of them, they are likely to become distracted or confused, which in turn can lead to classroom management issues and can derail the activity.</p> <p>Facilitators may want to rehearse giving directions to activities before delivering the curriculum.</p>	All Gen.M sessions include small-group or reflection activities. All of these activities require that the facilitator gives clear and concise activity directions.

SECTION 2: GENDER MATTERS CORE COMPONENTS

Core Pedagogical Components	Justification	Curriculum Examples
Following Detailed Steps for Activities	Each Gen.M activity provides concise steps and information for carrying it out correctly and effectively, to maintain fidelity to the activity.	All Gen.M activities require facilitators to follow steps provided in the activity plan.
Facilitating Brainstorming	Brainstorming is an effective technique that allows participants to quickly generate as many ideas as possible regarding a particular topic, in a free and nonjudgmental way. Using this technique allows participants to share their knowledge, ideas, and experiences, while providing the facilitator with an assessment of what they may or may not already know.	<p>Examples of Gen.M activities that use brainstorming are:</p> <ul style="list-style-type: none"> 1.3: Gender Messages 3.3: Sexual Decision Making 3.4: Ways to Show You Care
Facilitating Case Studies	Case studies are used to illustrate problems and solutions encountered in real life and allow participants to practice applying recently acquired knowledge. Case studies are used in small-group work and as a precursor to role plays.	<p>Examples of Gen.M activities that use case studies are:</p> <ul style="list-style-type: none"> 2.3: Assertive Communication 2.4: What Is Consent? 3.3: Sexual Decision Making
Teaching Skills	Consistent with research on skills acquisition, Gen.M uses a four-step approach to teach skills: 1) break down the skill into manageable, easy-to-understand steps; 2) demonstrate the skill effectively for youth and ask youth what they observed; 3) have youth practice the skill from first, relatively easy examples (to gain self-confidence) to more challenging; and 4) give positive, constructive feedback on the performance of the skill.	<p>Examples of Gen.M activities that teach skills are:</p> <ul style="list-style-type: none"> 2.3: Assertive Communication 4.4: How to Use Condoms 4.6: Negotiating Condom Use

Core Pedagogical Components	Justification	Curriculum Examples
Demonstrating Skills	Research has shown that modeling and demonstrating skills is an effective instructional strategy that allows students to observe a facilitator’s thought and behavior process. It is important for facilitators to be comfortable and able to demonstrate the skills they are teaching. Therefore, facilitators should practice and become familiar with all skills demonstrations in advance of facilitating them.	Examples of Gen.M activities that require facilitator skills demonstration include: 2.3: Assertive Communication 4.4: How to Use Condoms 4.6: Negotiating Condom Use
Practicing Skills	After observing a skills demonstration, youth practice that skill to develop competency. Gen.M often asks participants to practice skills multiple times to build mastery.	Examples of Gen.M activities that require skill practice are: 3.3: Sexual Decision Making 4.4: How to Use Condoms 4.5: Condom Obstacles
Facilitating Critical Thinking	Critical thinking helps learners better understand the cause and effect of certain behaviors. Rather than telling participants what you want them to know, engage them in the process of actively analyzing and evaluating information to reach their own answers or conclusions. This is especially true of activities designed to get youth to think about the influence of gender norms on sexual decision making.	Examples of Gen.M activities that use critical thinking are: 1.3: Gender Messages 1.4: Gender in the Media 2.2: Healthy Relationships and Deal-Breakers

SECTION 2: GENDER MATTERS CORE COMPONENTS

Core Pedagogical Components	Justification	Curriculum Examples
Facilitating a Fishbowl	The fishbowl is a pedagogical method that can be used when exploring controversial topics and when trying to elicit empathy from others. It allows participants to engage in thoughtful conversations, express opinions, and appreciate others' experiences. It is important to explain the rules of participating in the fishbowl at the start of the activity, so that safety is established and participants engage in a respectful conversation.	An examples of a Gen.M activity that uses the fishbowl is: 3.5: Video Review— Gender Fishbowl
Facilitating Individual Work	Although Gen.M leans toward activities that incorporate group work, some individual work is used to give participants time to personalize and apply what they have learned for themselves. Individual work also engages learners who prefer individual processing time.	Examples of Gen.M activities that incorporate individual work are: 2.2: Healthy Relationships and Deal-Breakers 3.2: Life Changes 5.5: Video Review— Making a Commitment
Facilitating Paired Work	Working in pairs gives learners a chance to think about ideas, questions, or skills on their own before launching into a larger group activity. Pair work also engages youth who may be less likely to participate in large-group discussions. By working in a pair, each learner also has a built-in sounding board/person to support the learning process.	Examples of Gen.M activities that incorporate paired work are: 2.3: Assertive Communication 4.6: Negotiating Condom Use 5.3: The Clinic

Core Pedagogical Components	Justification	Curriculum Examples
Facilitating Large-Group Discussion	<p>Most of the activities in Gen.M conclude with a large-group discussion. These interactive discussions allow participants to reflect on what they have learned, clarify information, personalize information and skills, and reinforce positive peers norms. Facilitator skills such as asking open-ended questions, keeping the discussion focused, summarizing key points, and navigating the flow of the discussion are critical.</p>	<p>Almost all Gen.M primary activities include a follow-up group discussion at the end of the activity.</p>
Facilitating Small-Group Work	<p>Placing participants in small groups transforms the large group into supportive learning teams in which all members are expected to contribute to the outcome of the activity. In a small group, participants have greater engagement and more opportunity to answer questions, solve problems, analyze information, and summarize main points.</p> <p>When participants are working in groups, facilitators should be available to provide assistance and support, as needed. Facilitators should observe groups and, if needed, answer clarifying questions, remind the group of the task directions, support the group in completing their tasks, and manage the allotted time for the small-group task.</p>	<p>Examples of Gen.M activities that incorporate small-group work are:</p> <ul style="list-style-type: none"> 1.4: Gender in the Media 2.4: What Is Consent? 3.2: Life Changes
Leading a Minilecture	<p>Minilectures are used minimally but strategically to impart facts, definitions, and instructions to participants. When partnered with other forms of learning, the minilecture is the easiest way to share knowledge quickly.</p>	<p>Examples of Gen.M activities that include a minilecture are:</p> <ul style="list-style-type: none"> 2.3: Assertive Communication 4.2: Keeping the Sperm and Egg Apart 5.3: The Clinic

Core Pedagogical Components	Justification	Curriculum Examples
<p>Facilitating a Role Play</p>	<p>A role play is an interactive teaching method that allows learners to practice new skills in close-to-real-life situations. A role play is particularly effective in building communication skills.</p> <p>Participants first observe role plays performed by the facilitators, are then given the opportunity to practice scripted role plays, and finally develop role plays in their own words. After the role play, participants receive feedback from their peers based on an objective observer checklist.</p> <p>This process is central to building participants' self-efficacy to delay and refuse sex and to negotiate the use of condoms and contraception.</p>	<p>Examples of Gen.M activities that include role plays are:</p> <p>2.3: Assertive Communication</p> <p>4.6: Negotiating Condom Use</p> <p>5.3: The Clinic</p>
<p>Reviewing and Recording Youth-Generated Video Messages</p>	<p>Each Gen.M session concludes with a review and youth-generated video messages that capture participants' personal viewpoints regarding the key lessons of the day.</p> <p>The video will be shared publicly after completion of the workshops, to serve as a reminder of the personal commitments they have made.</p>	<p>The message review and recording activities are the final activity of each Gen.M session:</p> <p>1.5: Video Review—It's about Me</p> <p>2.5: Video Review—Creative Expressions</p> <p>3.5: Video Review—Gender Fishbowl</p> <p>4.7: Video Review—Condom Slogans</p> <p>5.7: Closing Activity—Spider Web</p>

Core Pedagogical Components	Justification	Curriculum Examples
Using Worksheets	Worksheets allow participants to respond to specific questions in a guided way and provide them with more time to think critically about their thoughts and ideas regarding certain topics.	<p>Examples of Gen.M activities that include worksheets are:</p> <ul style="list-style-type: none"> 2.2: Healthy Relationships and Deal-Breakers 3.2: Life Changes 3.3: Sexual Decision Making

GEN.M'S CORE IMPLEMENTATION COMPONENTS

The core implementation components are the essential logistical elements needed to implement the Gen.M curriculum effectively. Table 3 lists each implementation component, with a corresponding justification.

Table 3: Gen.M Core Implementation Components

Gen.M Core Implementation Components	Justification
<p>The Gen.M curriculum is an educational workshop-based program designed around five content areas totaling 20 hours of instruction (with breaks).</p>	<p>The Gen.M curriculum was carefully constructed using a theory-of-change logic model. During the curriculum development phase, Gen.M's content fell into five sessions, each with several activities:</p> <ol style="list-style-type: none"> 1. Understanding Gender 2. Healthy Relationships 3. Big Decisions 4. Skills for Preventing Pregnancy 5. Taking Action to Prevent Teen Pregnancy <p>To give each of these topics an adequate time dosage necessary for behavior change, as well as time for breaks, 20 hours is needed to deliver the curriculum with fidelity.</p>

A Gen.M workshop group is made up of approximately 15 participants.

Gen.M uses participatory pedagogy (e.g., small-group work, role plays, etc.) throughout. Facilitating Gen.M with groups larger than 15 participants will make the facilitation of these pedagogical methods difficult to manage and challenging to complete with the time allotted. For example, having five small groups of five learners (25 total) report out to the larger group will take more time than having four small groups of three learners do the same. Not allowing each small group to report out means that some learners lose their voice in the learning process. Groups smaller than 6–8 participants may also pose a challenge to the interactivity of learning activities.

Gen.M Core Implementation Components

Justification

Gen.M workshop groups are made up of a nearly even number of male and female participants.

Having a relatively equal number of male and female participants allows for a synchronized gender approach. A synchronized gender approach posits that gender is a relational concept and that by addressing a single sex, we cannot expect sustainable change (Greene & Levack, 2010). For example, youth participating in a single-sex education program may learn the importance of using condoms and may feel skilled and empowered to do so. However, if their partner who has not received any education has attitudes that are contradictory to condom use, changes toward healthy gender norms and healthy behaviors will be more difficult to sustain.

In the Austin, Texas, study, Gender Matters was implemented with youth aged 14–16. However, program developers believe it can be facilitated with youth aged 14–19. Gender Matters can also be implemented with youth of different ethnic and racial backgrounds.

The concepts presented in Gen.M have been found to be difficult to translate from a cognitive and social development point of view to youth younger than 14. While Gen.M was not tested on youth beyond age 16, we believe that teens through age 19 would benefit from the program. The content and teaching methodologies used in Gen.M would likely need to be more advanced for individuals older than 19.

Gen.M requires two cofacilitators, one male and one female.

Having two facilitators, one male and one female, allows for the modeling of healthy gender norms, relationship dynamics, and communication.

Gen.M facilitators should receive training on effective facilitation of Gen.M.

As with any educational curriculum, it is unrealistic to think that even the most experienced of facilitators can implement a new curriculum without training in its content and pedagogical methods.

Gen.M facilitators must be certified to ensure proper delivery of the Gender Matters curriculum.

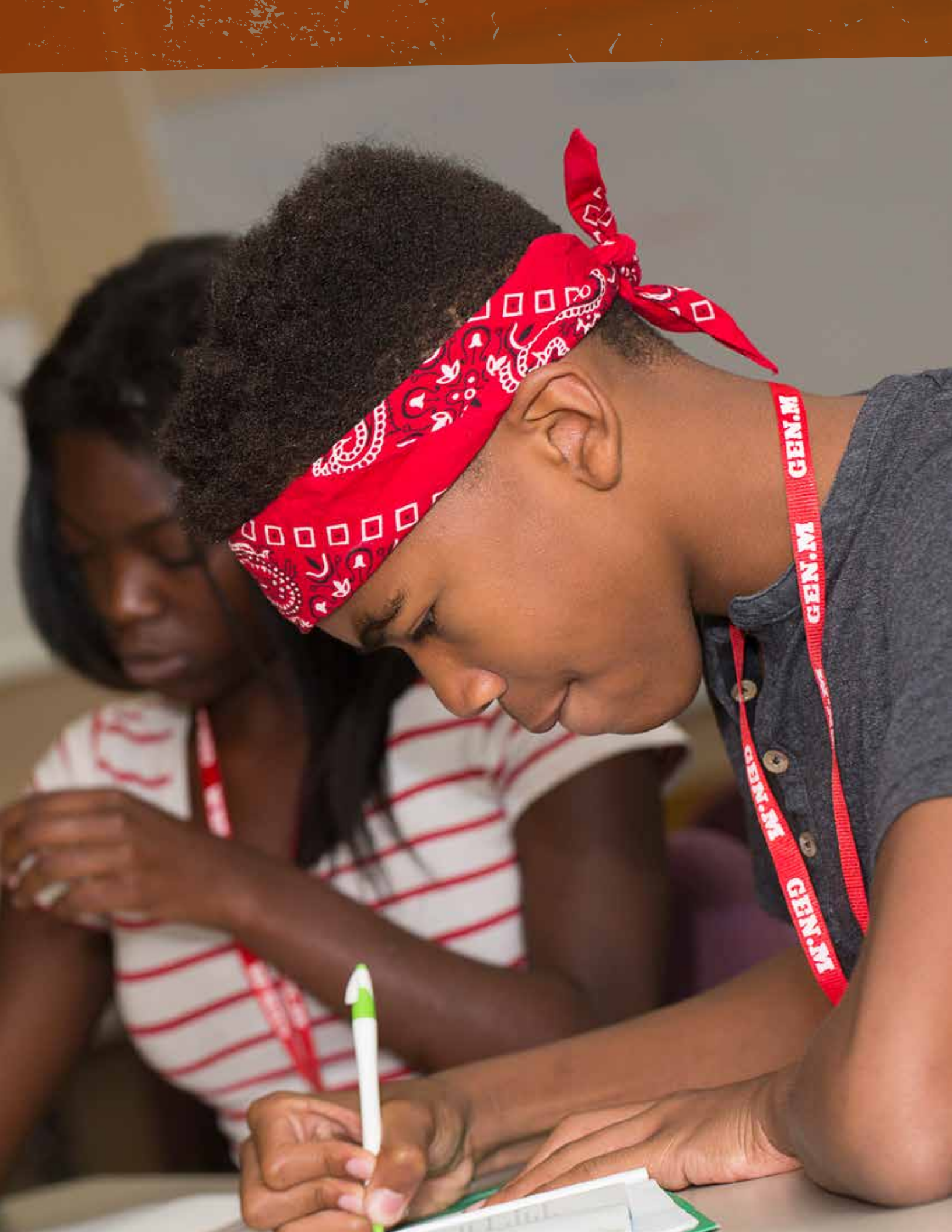
Facilitators who are about to embark on facilitating Gen.M should demonstrate a minimal level of competency in explaining key content and facilitating key pedagogical methods.

A Gen.M Certification Assessment Form can be found in the companion manual, *Gender Matters Facilitation Training Guide*.

Gen.M Core Implementation Components	Justification
Facilitators should have a background in sexuality education.	All Gen M. facilitators should have received training in sexual and reproductive health prior to Gen.M facilitator training, either through a community organization such as Planned Parenthood or by requesting a training from the developers of Gender Matters.
Gen.M sessions and activities should be delivered in the order presented in the curriculum manual.	Each content area of the curriculum builds upon the previous one, and therefore the curriculum should not be delivered out of sequence.
Facilitators must follow the detailed steps for leading each activity as it is written and according to the time allotted, as best as they possibly can.	The Gen.M curriculum is not a “guide,” but rather it is a full instructional manual on how to implement activities. While the curriculum is not necessarily scripted and does not have to be delivered verbatim, activity instructions, timing, and discussion questions should be followed closely.
Prepare to implement Gen.M prior to beginning workshops by studying the curriculum, practicing the delivery of activities, and preparing prop kits.	As with any curriculum or presentation, adequate study, preparation, and practice must be put in by facilitators, especially new facilitators, before they deliver Gen.M activities.

KEY TAKEAWAY POINTS

1. Core components are the essential, interrelated activities and approaches of a curriculum that ensure the curriculum’s effectiveness. To maintain fidelity to the original curriculum, core components must not be eliminated or compromised.
2. Core content components are the essential parts of a program that relate to *what* is being taught.
3. Core pedagogical components are the essential parts of a program that relate to *how* its content is taught.
4. Core implementation components are the essential *logistical* elements of a program that contribute to an environment conducive to learning.



SECTION 3

IMPLEMENTING GENDER MATTERS

BEFORE YOU BEGIN...

INTRODUCTION

Gender Matters is an evidence-informed program designed to promote adolescent sexual health and consists of three complementary components: 1) the 20-hour Gen.M curriculum; 2) a social media campaign; and 3) youth-generated video messages about gender, relationships, sexual decision making, and prevention of pregnancy and STIs. The three components work together to reinforce key messages about healthy behaviors and attitudes and work in synchronization with each other.

As stated previously, Gender Matters' overall goal is to decrease rates of teen pregnancy and STIs among 14–16-year-old youth. To achieve this goal, the program targets three behavioral outcomes:

For youth who are not sexually active:

1. Delay the onset of sexual intercourse

For youth who are sexually active:

2. Increase use of the most effective contraceptive methods, including hormonal contraception and the IUD
3. Increase consistent and correct use of condoms

Core to achieving these behavioral outcomes is exploring how inequitable and unhealthy gender norms affect adolescent sexual decision making. Gender is an important theme that runs throughout all Gender Matters activities and is an essential element of the program's theory of change.

In this section of the *Gender Matters Program Implementation and Adaptation Manual*, the steps for effectively implementing each of the three Gender Matters components are provided, as well as implementation tips and resources.

Gender Matters Three Intervention Components

1. 20-hour Gen.M curriculum
2. Social media campaign
3. Youth-generated video messages

Gender Matters Preparation Tasks

1. Conduct a brief formative assessment
2. Convene the project team
3. Establish community linkages
4. Recruit youth
5. Gather materials and other resources
6. Develop a work plan and timeline
7. Develop a realistic budget
8. Assess staff capacity and deliver training and technical assistance, as needed
9. Advocate for Gen.M
10. Plan for evaluation

PREPARATION TASKS

To implement the Gender Matters program in a manner consistent with the original study's protocols, your project team is advised to complete several preparation tasks well ahead of actual implementation. These tasks are described briefly below. Note that the tasks are not necessarily listed in chronological order—some may need to occur simultaneously, and some may need to be revisited from time to time.

In Appendix 7, you will find the Gender Matters Implementation Readiness Questionnaire. This tool is a type of checklist designed to help your team identify preparation tasks that have been satisfactorily completed and preparation tasks that may need further attention before implementation begins.

Task 1: Conduct a Brief Formative Assessment

No two communities of youth will be the same. As such, conducting a brief formative assessment is a worthwhile preparation task. Formative data will guide your team in strategically tailoring Gender Matters to the needs of local youth and to your organization's capacity. A summary of formative data will also support your team in justifying to funders and other stakeholders the selection of Gender Matters as an appropriate program for the youth you serve.

A formative assessment does not have to be a laborious endeavor. Reviewing existing reports and survey data is likely to provide you with the insight to customize Gender Matters appropriately. Complementing archival data with original data collected from youth using interviews, focus group discussions, and/or surveys, as well as interviews with the adults who work with youth, is also helpful and can provide a more specific, in-depth understanding of the youth you intend to serve. Collecting original data will likely require more time and resources but may be a good investment in the long run.

Possible Sources of Formative Data

Reviewing Existing Data

- Existing reports or grant proposals from your organization
- Reports from community-based organizations, foundations, or universities
- State pregnancy prevention coalition
- State or county Department of Health
- State Department of Education
- School district
- Survey data like CDC's Youth Risk Behavior Surveillance System or school district surveys

Collecting Original Data

- Focus group discussions with youth and/or adults who care for them
- Interviews with youth and/or adults who care for them
- Paper or online surveys with youth and/or adults who care for them

Below, you will find two sets of questions that can be used to guide a Gender Matters formative assessment. The first set aims to strengthen your team's understanding of the youth it intends to serve. The second set explores your organizational capacity to implement Gender Matters effectively. More information about conducting formative assessments can be found in the Supplemental Reading and Other Resources section of this manual.

Guiding questions for conducting a Gender Matters formative assessment include:

1. Have youth been exposed to previous sexuality education programs? What did youth learn from these programs? Are there ways in which Gender Matters can leverage previous education efforts?
2. How does the demographic context (e.g., age, cultural background, socioeconomic status, etc.) affect youth's understanding of sexual and reproductive health and sexual decision making?
3. Do youth perceive themselves to be at risk for pregnancy and STIs?
4. How do prevailing gender norms in your community affect teen attitudes and behaviors toward relationships, sexual decision making, use of contraception, and use of condoms?
5. What are youth attitudes and peer norms about teen pregnancy, relationships, abstinence, using condoms, using hormonal contraceptives, and accessing health services?
6. What myths, if any, exist about pregnancy, STIs, contraception, and condoms?
7. What sexual risk behaviors are prevalent among the youth you intend to serve?
8. What are the pregnancy and STI rates among the youth you intend to serve?
9. What social media platforms (e.g., Facebook, Twitter, Instagram, etc.) are most popular with youth?
10. Are parents supportive of sexuality education? If not, why not? How can this resistance be overcome?
11. Is your organization committed to implementing a science-based/evidence-informed sexuality education program like Gender Matters? Does Gender Matters fit with your organization's mission, values, vision, strategic plan, programs, and policies? Has the leadership and staff of your organization demonstrated enthusiasm and support for the program?
12. Does your organization have the necessary funding, staff, equipment, and time to implement Gender Matters effectively and with fidelity?
13. Are there state or local standards, policies, or laws that your team will need to abide by when implementing Gender Matters? What are they? Will they affect the

implementation of Gender Matters in a way that would compromise fidelity? For example, will Gen.M facilitators be able to conduct a condom demonstration?

14. What types of training and experiences has your team had in implementing sexuality education programs? Have they mastered the content and facilitation skills required to implement Gender Matters effectively? What type of additional training and/or coaching will they need?
15. How do project team members view gender equality? Adolescent sexuality? Teen pregnancy? Will personal values about these issues affect the implementation of Gender Matters?
16. Is there any resistance related to implementing Gender Matters among your project team, others in your organization, parents, and/or others in the community? What are the best ways to manage this resistance?
17. Has your team scheduled a Gender Matters Training of Facilitators?
18. What are the training and technical assistance needs your organization requires from the program developers for ongoing implementation?

Task 2: Convene the Project Team

Implementing Gender Matters requires a well-trained project team with varied skills. While one staff member may play multiple roles (e.g., a project coordinator may also serve as a curriculum facilitator), it is essential that all of the roles and responsibilities listed below be fulfilled.

The Gender Matters Project Coordinator/Manager should have the ability to:

- Manage the project, including establishing and monitoring the work plan and budget
- Supervise staff, including hiring and onboarding new staff, leading team meetings, providing supportive supervision, and coordinating and delivering training
- Report and coordinate within the implementing organization's policies and programs
- Establish and maintain relationships with outside partners and stakeholders (e.g., teen sexual health clinics, schools, recruitment sites, etc.)
- Conduct or liaise with an evaluator to conduct assessment and/or evaluation tasks
- Manage or delegate administrative tasks

Gen.M curriculum facilitators should have the ability to:

- Prepare for and facilitate the Gen.M curriculum with fidelity
- Coordinate logistics associated with delivering the curriculum
- Write reports on progress, challenges, lessons learned, etc., as needed
- Comply with evaluation protocols, as needed
- Videotape and edit youth-generated video messages

See Implementing Component 1: Gen.M Curriculum (page 57) for more information about Gen.M facilitator competencies.

The Gender Matters Social Media Coordinator (if your team decides to implement the optional social media campaign component) should have the ability to:

- Select and use appropriate social media (e.g., Facebook, Tumbler, Twitter, Instagram, etc.) and social media management tools
- Keep updated on the preferred social media platforms for youth, as the popularity of these media often change over time
- Establish and manage a social media web page/group
- Post content on social media in coordination with curriculum delivery
- Monitor and respond to youth posts
- Send text messages in coordination with curriculum delivery
- Troubleshoot technical problems

Task 3: Establish Community Linkages

Throughout the Gender Matters program, youth are advised to visit a sexual and reproductive health care provider if they are sexually active. In Gen.M's Session 5: Taking Action to Prevent Teen Pregnancy, youth are taught about the services available at local community health clinics (e.g., counseling, contraception, pregnancy testing, and HIV/STI testing and treatment, etc.), as well as being given a virtual tour of a community health center. Youth also practice (through a role play) how to make an appointment at a sexual health clinic.

Given the emphasis on using community sexual and reproductive health services in Gen.M, establishing relationships with community health care clinics is an important preparation task. Before implementing Gender Matters, your project team is advised to:

- Identify teen-friendly community health care clinics that provide low-cost, confidential, and teen-friendly sexual and reproductive health services
- Reach out to clinic staff and let them know about the Gender Matters program and how their clinic will be described during program implementation
- Advise clinic staff that youth from the Gender Matters program may be calling the clinic for appointments
- Inquire if the clinic has written materials that it would like your organization to share with youth participating in Gender Matters (If not, your project team should create a simple handout or pocket card with information about the clinic. This handout can be shared with youth during Gen.M sessions, as well as posted in social media campaign activities.)

Your project team is also advised to establish relationships with other community resources. Having linkages with community support services in primary health care, mental health, substance abuse, and domestic violence may come in handy during the course of implementing Gender Matters.

While curriculum facilitators may be eager and willing to help youth in any way they can, it is important that your project team understand its limits and what the Gender Matters program is intended to do and not do. For example, a Gen.M facilitator should not be expected to provide therapeutic counseling, legal advice, etc., to youth. A community referral list is a good tool to assist Gen.M facilitators in helping youth without overstepping their role as an educational facilitator.

When preparing a referral list, be sure that the list provides:

- A description of the services offered at the organization
- The name of a contact person at the organization, if possible
- The street address, e-mail address, web site, and phone number of the organization
- Directions to the organization (Be sure that the organization is a reasonable distance away and is accessible by public transportation.)
- Assurance that services are teen-friendly
- Assurance that the organization maintains confidentiality with teens
- Assurance that services are free or low-cost

Task 4: Recruit Youth

Recruiting youth for Gender Matters is an essential preparatory step. In the original Austin study, 14–16-year-old youth were recruited through a partnership with the Travis County Summer Youth Employment Program. The majority of youth in the study were African American or Latino and lived in zip codes with the highest teen pregnancy rates in Travis County. Youth attended a four-hour Gen.M session every day for five consecutive days (Monday–Friday). Youth were given a modest stipend for attendance. (See Gender Matters Core Components [page 27] and Making Adaptations to Gender Matters [page 79] for guidance on working with youth representing different demographics.)

Your organization may have existing youth groups or may partner with another community organization that works with youth groups, such as the Summer Youth Employment Program in Austin. Or your organization may decide to adapt Gender Matters to work in a school setting during school hours or after school. In either case, the following items should be in place before recruitment of youth can begin:

- A brief fact sheet/flyer should summarize information about the program, start date, and location. An example of such a fact sheet is found in Appendix 8.

- If Gender Matters is delivered in a setting outside of a school classroom, providing a modest incentive (e.g., snacks, a t-shirt, gift cards, etc.) may help to maintain attendance. Your organization may want to require that participants maintain a minimum attendance record to receive the incentive (e.g., youth must attend at least 80% of the program). If your team chooses to use incentives, include a description of them in your program announcements.
- Depending on the policies of your organization and/or partnering organization, you may need to obtain parental consent for youth participation in the program. A sample consent form adapted from the Austin study is found in Appendix 9.
- A sign-up list should be developed to collect participants' names and contact information, including cell phone numbers, e-mail addresses, and any social media user information, if conducting a social media campaign.

Task 5: Gather Materials and Other Resources

A list of the materials required to facilitate Component 1 of Gender Matters is found in Appendix 10. More information about preparing a Gen.M prop kit (i.e., a collection of all of the materials needed to implement the Gen.M curriculum) is found in Implementing Component 1: Gen M Curriculum (page 57). Materials for Components 2 and 3 are found on pages 64 and 71, respectively. Allow your team sufficient time to purchase and gather these materials before implementing the program.

Facilitating the Gen.M curriculum requires, in addition to prop kits, a private, comfortable meeting room that has chairs, tables, and wall space on which to hang flipcharts and posters.

Task 6: Develop a Work Plan and Timeline

The Gender Matters three-component program has many “moving parts,” so to stay on track it is important to develop a work plan that identifies tasks, resources needed, timeline, staff responsible, and indicators of completion. The work plan will also help with improving future planning, reporting, and staff supervision.

Task 7: Develop a Realistic Budget

It is difficult to advise on a bottom-line budget amount needed to implement Gender Matters. Location, staff salaries, leveraging of other funds, collaborating agreements with other organizations, the extent to which your project team implements Components 2 and 3, the extent of evaluation activities, and the number of youth you intend to serve and where are a few of the variables that will affect the budget. At a minimum, implementing organizations should include the following line items in a Gender Matters implementation budget:

- Assigned staff salaries and level of effort
- Fringe benefits
- Gen.M prop kit supplies (see Appendix 10)

- Participant incentives
- Mileage to and from workshop venues
- A smartphone, tablet, or camera (for videotaping)
- Supplies and equipment
- Basic operating costs (e.g., photocopying, phone, Internet connection, etc.)
- Indirect costs required by your organization
- Training and technical assistance provided by program developers

Other line items to consider including in your budget, depending on your organization's circumstances, include:

- Consultants (e.g., facilitators, evaluators, curriculum trainers, etc.)
- Honoraria for partnering organizations
- Facility rental for delivery of the Gen.M curriculum and/or for facilitator training
- Video equipment (for Component 3)

Task 8: Assess Staff Capacity and Provide Training and Technical Assistance, As Needed

Several tools in this manual can help you assess staff capacity:

- The formative assessment questions, found in Task 1 above
- The roles and responsibilities of core Gender Matters staff, found in Task 2 above
- Gen.M facilitator key competencies, found on page 61
- Questions in Appendix 7 and in Task 1

More information about preparing and delivering Gender Matters training is found in the *Gender Matters Facilitator Training Guide*.

While group training is a standard way of building capacity for sexuality educators, other forms of technical assistance also support this goal. For example, your project team may want to consider:

- Conducting regular one-on-one supportive supervision sessions
- Holding group meetings designed to discuss successes and challenges
- Videotaping the delivery of a Gender Matters session and pointing out facilitation that is done well and areas that can improve
- Practicing curriculum facilitation with peers and giving/receiving feedback

- Designing and delivering customized and targeted minitrainings on topics with which the team is struggling
- Developing a training certification process (Information about the Gen.M facilitator certification process is provided in the *Gender Matters Facilitator Training Guide*.)
- Working with the program developers for ongoing training and technical assistance needs

Task 9: Advocate for Gen.M

Implementing a sexuality education program can elicit resistance from staff, other community organizations, and the public, for a multitude of reasons. They may have concerns about teaching teens about sexual decision making and contraception, hold values that are inconsistent with sexuality education, be misinformed about the program's goals, or have other reasons.

There are several things that your team can do to minimize controversy and advocate for the implementation of Gender Matters with fidelity. For example, your team may consider creating a Frequently Asked Questions handout, delivering a brief presentation for your organization, holding an informative workshop for parents, etc. Resources to help your team with this task are found in Supplemental Reading and Other Resources (page 91).

Task 10: Plan for Evaluation

Any team implementing Gender Matters should plan for, and conduct, a process evaluation. A process evaluation will help your team determine how well the Gender Matters implementation plan is being conducted. In addition, process evaluation data will help in understanding why your team was able, or not able, to achieve desired outcomes, how program implementation can be improved in the future, how satisfied youth were with the program, what opportunities for staff training and technical assistance there may be, and what results can be reported to funders.

Decisions about the scope and objectives of a process evaluation should be made *before* program implementation. All staff involved with implementation should be trained on how and when to complete process evaluation instruments.

Depending on your organization's resources, capacity, and available time, you may also want to conduct an outcome evaluation. An outcome evaluation requires significantly more preplanning, staff expertise, time, and funding.

More information about conducting process and outcome evaluations of the Gender Matters program is found in the *Gender Matters Evaluation Compendium*.

IMPLEMENTING COMPONENT 1: THE GEN.M CURRICULUM

INTRODUCTION

Component 1 of the Gender Matters program is a 20-hour interactive teen pregnancy and STI prevention curriculum called Gen.M. The curriculum is divided into five four-hour sessions. (Each session includes a 15-minute break.) Each session is divided into several (5–7) participatory activities and ends with a review activity designed to elicit and document key messages that the youth have internalized during the session.

The key to the curriculum's theory of change is the influence of gender norms on sexual decision making. Awareness about the role gender plays in forming sexual attitudes and behaviors is woven into every session. Youth are encouraged to question the costs to themselves, their partners, and their peers of abiding to rigid, inequitable gender norms and to explore healthy, equitable ways of expressing their manhood or womanhood. Discussing gender and challenging unhealthy gender norms is a core component of this program.

The Gender Matters theory-of-change logic model, which describes how curriculum activities are deliberately and strategically linked to changing prioritized psychosocial determinants, such as gender norms, is found in Appendix 1 (At-a-Glance Version) and Appendix 2 (Comprehensive Version).

In this section of the *Gender Matters Program Implementation and Adaptation Manual*, you will find guidance on:

- The Gen.M activity format
- The Gen.M Code
- Materials needed for implementing Component 1
- Gen.M facilitator key competencies

Gen. M Sessions

Session 1: Understanding Gender

Session 2: Healthy Relationships

Session 3: Big Decisions

Session 4: Skills for Preventing
Pregnancy

Session 5: Taking Action to
Prevent Teen Pregnancy

THE GEN.M ACTIVITY FORMAT

Each Gen.M learning activity follows a standard format and contains the following components:

- The **Activity Title** is a short description of the activity content. Activity titles are numbered by session and activity, so Activity 2.3: Assertive Communication is the third activity in Session 2.
- The **Activity at a Glance** table lists each subactivity title and provides a brief description and time estimates.
- Gen.M’s **Learning Objectives** describe the changes your team should expect to see in the *youth* after the activity is completed (e.g., changes in knowledge, perception of risk, ability to demonstrate a skill, etc.). The learning objectives should help facilitators stay focused and accountable to the activity plan.
- The **Materials** section lists materials needed specifically for the activity. All materials should be prepared ahead of time and stored in the Gen.M prop kit.
- The **Advance Preparation** section provides instructions on what to prepare and how to prepare it for the specific activity. For example, many Gen.M activities require that a poster or flipchart be written ahead of time. For all activities, it is critical that facilitators review the activity plan ahead of time, make their own facilitator notes, and practice and coordinate with their co-facilitator before delivering the session’s activities with youth. This is especially true for facilitators who are new to Gen.M.
- The **Procedure** section provides step-by-step instructions on how to deliver the activity, with time estimates. While the instruction plan is not a script, it should be followed as closely as possible to maintain fidelity to Gen.M’s theory of change. Facilitators should feel free to phrase activity instructions, discussion questions, key points, etc., in their own words, as long as the essence of the point is not changed. Time estimates help facilitators monitor their pace and stay on track to fully complete the activity in the allotted time.
- On occasion, you may find a box titled “Facilitator Note” within an activity plan. Facilitator notes are not meant to be shared with youth. They are meant to give facilitators background information, facilitation tips, or warnings about potential pitfalls.
- The **Review of Key Messages** appears at the end of each activity, in a box listing the session’s key points. Most of these key messages can be linked to the Gender Matters Code. It is important that these messages be reviewed with the youth. This is a key pedagogical technique in Gen.M’s theory of change.

- At the end of each activity, you will find guidance on how to **Transition** from the existing activity to the next activity. This is designed to help facilitators make a connection between one activity and the next and keep the session's flow.
- All **Handouts and Worksheets** needed for the activity are clearly labeled and found within the activity procedure/instructional plan.

THE GEN.M CODE

In Session 1: Activity 1.1 of Gen.M, youth are introduced to the Gender Matters Code, the tenets of which are designed to help people live better, happier lives. As the preamble of the Gender Matters Code states, "...all people are created equal and...have the right to mutually satisfying and respectful relationships, good health, and the skills to make our own choices that will help us to reach our goals and dreams while preventing an unplanned pregnancy."

The Gender Matters Code comprises six core messages. Consistent with the 17 Characteristics of Effective Sex and HIV Education Programs (Kirby, Laris, & Rolleri, 2007) and fuzzy-trace theory (Reyna & Brainerd), these messages should be deliberately reinforced throughout the curriculum's delivery. Through repetition and varied application, youth are more likely to recall these messages in real-life situations.

The Gen.M Code is a core component of the program. Its six statements were deliberately developed to encapsulate the curriculum's core messages. By the time they complete the program, youth should be able to retrieve them with ease in real-life decision-making situations. Gen.M facilitators should memorize these six statements and reinforce them during curriculum facilitation whenever appropriate.

Gender Matters Code

1. I am the boss of me.
2. I decide what gender means to me.
3. I treat others in the way I want to be treated.
4. I make my own decision about if and when to have sex.
5. I use protection every time I have sex.
6. I go to the clinic to get tested and protected.

MATERIALS NEEDED FOR IMPLEMENTING COMPONENT 1

In an effort to keep the materials needed to implement the Gen.M curriculum organized and easily available, the Austin project team developed a "Gen.M prop kit." The prop kit contains all of the materials that are needed to implement the entire curriculum, including handouts, worksheets, posters, markers, tape, birth control kit, condoms, and other materials. The prop kits allow facilitators to gather what they need for Gen.M sessions in

one place, as well as avoid losing or damaging supplies. This container should house only Gen.M materials and should be easily portable and accessible for workshop sessions. For example, your project team may want to purchase an inexpensive roller-board suitcase, backpack, or plastic storage box to be the container for the prop kit.

Facilitators should ensure that prop kits are consistently organized and in good condition. Routine maintenance includes replacing damaged or worn materials, updating informational handouts, and restocking materials that have run low. Handouts can be kept organized in labeled folders or binders. Great care should also be taken to keep condoms and contraceptive samples protected in the container.

While the prop kits simplify the preparation for each Gen. M session, facilitators must still review each session ahead of time and be sure that the necessary materials are in the prop kit. Not having the necessary materials on hand during the session will make facilitation more challenging, may create classroom management issues, and may compromise implementation fidelity.

Appendix 10 provides a list of general supplies and a list of materials specific to each session.

Figure 4: A Gen.M Prop Kit



GEN.M FACILITATOR KEY COMPETENCIES

High-performing Gen.M facilitators should be able to demonstrate mastery of the key content and the facilitator skills described below. In addition, they need to have a professional set of values and beliefs and a comfort level that is consistent with implementing Gen.M effectively. In Supplemental Reading and Other Resources (page 91), you will find resources that provide descriptions, guidance, tips, and tools for mastering many of the competencies listed below.

It is worth noting that the list of Gen.M facilitator competencies has several uses. Implementing organizations can use it to develop job descriptions, job interview questions, training and technical assistance activities, and performance evaluation indicators.

Content

A high-performing Gen.M facilitator is able to:

1. Explain the Gender Matters theory of change
2. Explain the importance of facilitating the Gen.M curriculum with fidelity
3. Present The Gen.M Code with clarity
4. Explain gender, gender norms, sexual orientation, and gender equality
5. Discuss how healthy, equitable gender norms contribute to positive sexual and reproductive health outcomes
6. Explain the characteristics of healthy and unhealthy adolescent relationships
7. Explain basic skill strategies related to assertive communication and refusal
8. Explain sexual consent, how to give it, and how to accept it
9. Explain the benefits of sexual abstinence
10. Use medically accurate names for body parts, STIs, and contraceptives
11. Explain basic reproductive anatomy and physiology, including how a pregnancy occurs
12. Explain the life changes and consequences of teen pregnancy and teen parenthood
13. Explain basic facts about contraceptive methods (including condoms), how they work, and how they can be accessed
14. Explain how STIs, including HIV, are transmitted, common signs and symptoms of STIs, how STIs are prevented, and where one can obtain testing and treatment
15. Describe services available at community reproductive health centers
16. Refer participants to community youth services
17. Explain mandatory reporting laws specific to location

Facilitation Skills

A high-performing Gen.M facilitator is able to:

1. Establish and maintain a safe and comfortable learning environment, inclusive of everyone
2. Lead large-group discussions
3. Give clear activity instructions
4. Facilitate role plays
5. Manage small-group work
6. Demonstrate proper use of a condom and other contraceptives
7. Facilitate youth-generated video messages
8. Manage classroom issues (e.g., nervous laughter/acting out, emotional reactions, disclosure of sensitive information, etc.)
9. Coordinate logistics associated with the effective implementation of Gender Matters

Professional Values, Beliefs, and Comfort

A high-performing Gen.M facilitator:

1. Believes that all teenagers have the right to medically accurate and up-to-date information about human sexuality and sexual health
2. Believes that teenagers should have access to quality, affordable, confidential sexual and reproductive health services
3. Believes that teenagers are sexual beings and have a right to enjoy their sexuality
4. Believes that any kind of sexual activity must be consensual and free of coercion
5. Believes that teenagers have the right to enjoy safe, healthy relationships that are free from physical violence and emotional abuse
6. Believes that teenagers in consensual sexual relationships should always take the responsibility to protect themselves from pregnancy and STIs
7. Believes in gender equality
8. Is comfortable with handling contraceptives, including condoms, for demonstration purposes
9. Is comfortable facilitating discussions related to teen sexual behavior with adolescents
10. Is respectful of all teens, regardless of their race, ethnicity, immigration status, sex, sexual orientation, socioeconomic status, religion, parenting status, ability, etc.
11. Is enthusiastic about working with teens

Cofacilitation

The Gen.M curriculum requires two facilitators, one male and one female, to work together to facilitate curriculum activities. Tips for developing and maintaining successful cofacilitation relationships are listed below.

- **Get to Know Each Other.** Take some time to have lunch or coffee with your cofacilitator. Get to know their personality, sense of humor, interests, etc. This familiarity will help in creating an authentic, friendly, and respectful relationship dynamic during curriculum facilitation.
- **Discuss What Feels Supportive/Not Supportive.** Like in any relationship, it is important to know what kinds of things we can do or say that can help the other person feel supported. Equally important are the things that others do or say that we find irritating or not supportive. Take some time to think about your facilitation experiences and share your needs with your cofacilitator. Invite him or her to do the same. Do your best to accommodate your facilitator's requests. Some questions to think about:
 - When is it OK for your cofacilitator to interrupt?
 - How would you like your cofacilitator to assist you during the facilitation of a given activity (e.g., record things on flipchart paper, distribute worksheets, etc.)?
 - Do you like to be given time warnings?
 - Is there any specific feedback you want your cofacilitator to give you?
 - How would you like to handle the need for breaks or moments when you need to leave the workshop room?
- **Meet to Plan Session Facilitation.** Take some time to meet with your cofacilitator before facilitating a session. Review the session plan together, discuss instructional design, clarify information or instructions, and discuss what to do in case a challenge arises. Agree on how the session and associated preparation tasks will be divided (i.e., who will prepare and facilitate what pieces).
- **Practice.** For new Gen.M facilitators, it is highly recommended that you practice the delivery of each session activity; for seasoned Gen.M facilitators, talking through the activities out loud with each other should suffice. This practice will help each of you get better acquainted with each other's style, pacing, and requests for support.
- **Play to Each Other's Strengths and Give Space to Grow.** As you get to know your cofacilitator, you will find that each of you may gravitate toward facilitating certain kinds of activities or that one of you may be especially good at facilitating certain kinds of activities. Playing to each other's strengths is generally a good idea and is satisfying all around. It is also important to encourage each other to step out of your comfort zone to grow and become an even better facilitator. If your cofacilitator is particularly good at facilitating a certain activity, think of him or her as a mentor in supporting you to also master that activity.

- **Debrief After the Session.** After each session, take 10–15 minutes to debrief about the session. What went well? What did not go so well? What could be done differently next time? Ask each other for feedback, but first agree on a protocol on how each of you will give and receive feedback. Always acknowledge each other's efforts and celebrate successes!

IMPLEMENTING COMPONENT 2: SOCIAL MEDIA CAMPAIGN

INTRODUCTION

Implementing a social media campaign along with the Gen.M curriculum is an effective way to enhance the curriculum's learning objectives and to help participants recollect and internalize key curriculum concepts and messages. The Gender Matters social media campaign involves interacting with participants through social media outlets during and after the conclusion of the curriculum component. This may include developing and maintaining a Gen.M Facebook group or similar social media platform. During the initial study, the Austin team also sent text messages to all participating youth, including youth who were too young or chose not to participate in social media outlets like Facebook. Your team will need to assess the feasibility of conducting a social media campaign for your program, as it will vary in success with different youth and communities.

Note that Component 2 is considered an optional program component. During the initial study, youth participation in social media activities was not as active as expected. As such, the development team cannot say with confidence that the social media component was essential to the intervention's effectiveness. Results may vary in intervention replications.

Social media components include:

- Reinforcing key messages about healthy sexual behavior and gender norms
- Reinforcing positive attitudes about healthy sexual behavior and gender norms
- Promoting healthy gender norms
- Reinforcing healthy peer norms about gender, contraceptives, relationships, and sexual decision making
- Promoting youth conversation about sexual behavior, contraceptives, relationships, and sexual decision making
- Showcasing youth-generated video messages

- Reinforcing The Gen.M Code
- Providing additional health-related information to participants

In this section of the *Gender Matters Program Implementation and Adaptation Manual*, you will find guidance on:

- The rationale for the social media campaign
- Developing social media content
- Selecting a social media platform
- Equipment needed for the social media campaign
- Sharing relevant news stories
- Youth-driven engagement
- Lessons learned

RATIONALE FOR THE SOCIAL MEDIA CAMPAIGN

The Gender Matters social media campaign is grounded in recent research on a pedagogical technique called *partnering* (Prensky, 2010). The partnering technique encourages young people to use technology for discovering answers to motivating questions posed by adults. Partnering not only engages young people on their level, but it also helps youth understand how to use social media and the Internet in a healthy, meaningful way.

Through contests and peer-led discussions, Gender Matters participants from the Austin study had the opportunity to use social media to continue learning Gen.M curriculum concepts outside of the classroom setting. For example, some youth posted popular music videos, magazines, and advertisements to point out the messages they receive on a daily basis about what it means to be a “real” man or a “real” woman in our society. These posts were then challenged and discussed within the group, which often led to improved attitudes and peer norms about gender equality and healthy relationships.

The social media campaign has the potential to provide several benefits to youth. Participating youth have the opportunity to:

- Engage in additional learning activities outside the classroom (e.g., quizzes, contests, discussions, and debates)
- Express their opinions and partake in discussions, thereby learning how to use social media positively, responsibly, and in a meaningful way
- See their peers committing to healthy, positive behaviors, which helps to counteract

the negative images they see in other social media and social circles

- See themselves and their peers “star” in videos where they state healthy messages in their own words (Such videos can reinforce their intentions to choose healthy behaviors.)
- Filter out harmful messages proliferating throughout social media and create a place where youth have access to reliable information and healthy, positive messages
- Find factual and credible information about reproductive and sexual health

DEVELOPING SOCIAL MEDIA CONTENT

The content presented in a social media campaign can include status updates, news items, responses to posts, videos, articles, infographics, community resources, thought-provoking questions, contests, and so on. Keeping the campaign objectives as a guide, every message sent out during the Gender Matters social media campaign should intentionally reinforce the curriculum’s key messages and keep youth engaged with the program.

During the Austin study, social media campaign messages were organized by monthly themes that corresponded with Gen.M sessions and the Gen.M Code. Program staff and selected participants posted content and sent text messages related to the respective theme (see Table 4) almost daily and offered weekly contests related to Gen.M.

Table 4: Gender Matters Social Media Campaign Monthly Themes

Month	Social Media Campaign Theme	Example Message
1	Gender Norms <ul style="list-style-type: none"> Increasing awareness about harmful and inequitable gender norms Questioning the costs to oneself and others of abiding by these norms Redefining these gender norms into healthy, equitable ones 	“Contest Time!!! Watch this TEDTalk by Tony Porter and then name two messages you get from friends or family about what it means to be a man or woman.”
2	Sense of Independent Self <ul style="list-style-type: none"> Being independent Being able to make your own decisions 	“Post an image of what ‘I am the boss of me’ looks like to you to receive a \$5 gift card!”
3	Prevention of Pregnancy <ul style="list-style-type: none"> Delaying sex Using contraception, including condoms Using health clinic services Understanding the realities of teen parenthood 	“What advice would you give if a friend told you they are sexually active?” “For a \$5 gift card, name one unhealthy gender message and how it can lead to an unintended pregnancy.”
4	Healthy Relationships <ul style="list-style-type: none"> Communicating assertively Preventing violence Promoting healthy relationship characteristics—honesty, equality, respect, and responsibility 	“Contest Time!!! What are three things you can do to show a romantic partner you care about them that don’t include sex?”

SELECTING A SOCIAL MEDIA PLATFORM

The majority of youth participating in the Gender Matters Austin study had a Facebook account that they checked frequently. Given the popularity of this platform, a private Facebook group (i.e., one that only workshop participants could log onto) was created for the interactive portion of the social media campaign.

The campaign also included fun and informational text notifications that were sent to youth participants weekly and in complement with Facebook posts. Text messages were intended to draw participants to the Facebook page, where they could comment and have

discussions. Text messages also served to engage those participants who were not on Facebook. Examples of these messages include:

- “Healthy relationships are built on communication, trust, & respect. Check out the Gen.M Facebook group this month to learn & talk about relationships!”
- “Did you know avoiding pregnancy now means a better chance of more money later? The Gen.M Facebook group is discussing prevention methods for prizes today!”
- “Gender is learned & affects how we make decisions about sex. Check out the Gen.M Facebook group for latest info to prevent pregnancy & win contest prizes.”

Although Facebook was suitable for the Gender Matters study, other social media platforms may be used instead of or in addition to Facebook. Table 5 provides an overview of the purpose and pros/cons of four social media platforms popular with youth. When choosing an appropriate social media platform, keep the following features in mind:

- Relevance to and desirability for program youth
- Ability for adults to monitor activities
- Capacity for inclusive group discussions
- Proficiency for sharing media items and information
- Extent of privacy settings

EQUIPMENT NEEDED FOR THE SOCIAL MEDIA CAMPAIGN

- **Computer or Tablet.**
- **Internet Connection.**
- **Online Platform Management Tool.** The Gender Matters social media campaign included a dedicated staff person to oversee social media on a daily basis and contribute content with a professional profile dedicated to engaging youth in the Gender Matters Program (not the employee’s personal profile). The online platform management tool HootSuite helped program staff find, plan, and schedule content to post on the Facebook Gender Matters group page and on the Gen.M employee’s professional profile. HootSuite, as well as other services (e.g., Bitly, EveryPost, Crowdbooster, SproutSocial, etc.), can also provide insight tools to help adults better understand the content that youth are most interested (i.e., by clicking on). See Supplemental Reading and Other Resources (page 91) for more information about online platform management tools.
- **Online Texting Services.** Online texting services are also available to schedule and send text messages without the need for a physical phone. During the Austin study, Gender Matters texts came from ClubTexting.com, which has the ability to run reports showing which youth are actually receiving the messages. See Supplemental Reading and Other Resources (page 91) for more information about online texting services.

Table 5: Examples of Social Media Platforms and Campaign Functions

Platform	Purpose	Pros (+) and Cons (-)
Facebook	Stay connected with people to discover what's going on in the world, and share and express what matters to you	<p>Discussions (+)</p> <p>Message board (+)</p> <p>Various ways to share information and interact (+)</p> <p>Private groups (+)</p> <p>Popular with young people (+); however, some young people are losing interest in Facebook as other, more "fun" networking platforms emerge (-)</p>
Twitter	Social network and real-time communication service	<p>Information sharing (+)</p> <p>Retweet youth (+)</p> <p>Can be more frequent (+)</p> <p>Can group tweets around common topic or account (hashtag) (+)</p> <p>Retweeting messages from trusted organizations can help connect youth with local and online resources (+)</p> <p>Popular with young people (+)</p> <p>Short, brief statements (+, -)</p> <p>Harder to track interactions (-)</p>
Instagram	App that lets you take photos, add a filter, and post them on a variety of social media platforms from your phone	<p>Create and share photos and images and Information (+)</p> <p>Fun, creative way to engage with youth (+)</p> <p>Can group images around common topic or account (hashtag) (+)</p> <p>Popular with young people (+)</p>
Tumblr	Blogging platform to post video, audio, words, social bookmarks, photos, and even other people's blog posts and share it with other people	<p>Can share information and media (+)</p> <p>Discussion abilities are minimal (-)</p>

YOUTH-DRIVEN ENGAGEMENT

Although Austin program staff created a dedicated Facebook page for program youth to congregate at and find support for making healthy decisions, youth engagement was considered low during the study's first year. Through youth focus group discussions, program staff learned that youth participants were interested in using social media to stay in touch with friends and were unsure about how to use social media for activism and discussion.

Based on the data obtained from youth focus group discussions, project staff created a "Social Media Ambassador Program." The program incentivized youth (with gift cards based on their number of posts) to post supportive messages and start discussions with their peers in the Gender Matters Facebook group. The youth ambassadors also provided insights into using social media platforms in ways that can better reach and entice their peers. Utilization of the Social Media Ambassador Program increased current and past workshop participant interaction within the group.

LESSONS LEARNED

Throughout the entirety of the Gender Matters Austin study, program staff carefully considered ideas that resonated with program youth and techniques that would encourage them to visit and interact with the Facebook group. Some of these lessons learned include:

- **Use Small Incentives.** Small incentives (e.g., gift cards) worked to get youth to join and participate in the Gender Matters Facebook group.
- **Use Visuals.** When creating engaging content, messages should be heavier on visual images than text alone. Austin program staff found that simply asking a discussion question did not yield much interest. However, when the question was accompanied by a visually appealing media image, youth were much more likely to comment on what was posted. Pairing a related photo or video from Gen.M sessions added context and entertainment to discussion questions.
- **Use a Social Media Ambassador Program.** Implementing this program helped staff better understand how to use social media platforms in ways that connect program youth to one another, as well as how to make content more fun and engaging.
- **Keep Current.** Social media platforms that youth use change over time and from community to community. It is important to keep up with the changing social media landscape by talking with youth and surveying their preferences. This question can also be part of your formative assessment.
- **Assign a Staff Person.** Keeping a social media campaign fun and engaging requires a dedicated staff person to comment and post and to stay up-to-date on current issues and relevant news.

IMPLEMENTING COMPONENT 3: YOUTH-GENERATED VIDEO MESSAGES

INTRODUCTION

The Gen.M program uses various methods to reinforce key messages related to equitable gender norms, healthy relationships, and prevention of pregnancy and STIs. One key method is videotaping youth who discuss key learnings in their own words.

Each of Gen.M's five sessions ends with a review activity (20–45 minutes) that encourages youth to reflect on, and put into their own words, the key learnings from the session. As with other Gen.M curriculum activities, a detailed instructional plan for facilitating the activity is provided. During these reviews, youth participants engage in an interactive process while being videotaped. The video footage is used to reinforce key messages from the curriculum and showcase youth's personal interpretations of the session's concepts and messages. Video reviews are a core component of the Gen.M curriculum and are based on the principles of cognitive dissonance, fuzzy trace theory, and the theory of reasoned action.

In this section of the *Gender Matters Program Implementation and Adaptation Manual*, you will find guidance on:

- Models for summarizing youth-generated video messages
- Other video process options to consider

Gender Matters Video Review Activities

- Session 1: Interviews
- Session 2: Creative Expressions
- Session 3: Gender Fishbowl
- Session 4: Condom Slogans
- Session 5: Setting Intentions

MODELS FOR SUMMARIZING YOUTH-GENERATED VIDEO MESSAGES

In the Austin study, the video footage from all five sessions was edited into a 15-minute documentary and then posted on the Gen.M Facebook page and shown at a community screening event. Practitioners seeking to replicate the Gen.M program may select from several video summary models described in Table 6. Several factors should be considered when selecting the video summary model, including budget, equipment, resources, time, staff capacity, and social media presence.

OTHER VIDEO PROCESS OPTIONS TO CONSIDER

In addition to the models listed in Table 6, several other options can enhance youth engagement during the video review process. These additional options are not considered core to the implementation and should only be considered *in addition* to one of the video review process models described in Table 6:

- **Youth Involvement.** Allow program participants to contribute to the filming process by using their own smartphones and posting on the Gender Matters and/or organization social media site. Videos filmed by youth create additional footage without extra costs and also allow staff to see the program through the eyes of the youth participants. In addition, youth are able to wear the videographer “hat” and are given an empowering opportunity to further engage with Gender Matters content. This option requires consistent oversight of the organization’s social media platforms, to ensure that youth-generated videos are appropriate and relevant to the program.
- **Short Clips.** Rather than, or in addition to, creating one long (about 15-minute-long) video, create several short video clips that can be posted throughout the year following implementation. Posting occasional short clips can increase interest in the web site and increase interaction. For examples, clips could focus on reinforcing each statement of the Gen.M Code, using condoms correctly, or demonstrating assertive communication skills.

Table 6: Models for Summarizing Youth-Generated Video Messages

Tasks	Model 1 Less Expensive	Model 2 More Expensive	Model 3 Most Expensive
Selecting Video Equipment	<ul style="list-style-type: none"> Use the video camera function on a smartphone or tablet Use Gen.M staff or volunteers to film youth 	<ul style="list-style-type: none"> Purchase video camera(s) (as allowable by budget) Use Gen.M staff or volunteers to film youth 	<ul style="list-style-type: none"> Hire a professional film crew/ videographer to film youth
Filming	<ul style="list-style-type: none"> Film review activities at the end of each of the five Gen.M sessions 	<ul style="list-style-type: none"> Film review activities at the end of each of the five Gen.M sessions Film other activities from the workshop Film individual interviews with youth and staff outside of the sessions 	<ul style="list-style-type: none"> Film review activities at the end of each of the five Gen.M sessions Film other activities from the workshop Film individual interviews with youth and staff outside of the sessions Film background footage of interactions going on during the session (This can serve as filler/B-roll or help to transition from one section to another.)
Editing	<ul style="list-style-type: none"> Use short segments from the five sessions to create the summary film 	<ul style="list-style-type: none"> Train staff to use free/low-cost video editing software, such as iMovie (Mac) or Movie Maker (Windows) 	<ul style="list-style-type: none"> Hire a film crew to edit the footage into a 15-minute documentary

Tasks	Model 1 Less Expensive	Model 2 More Expensive	Model 3 Most Expensive
Screening	<ul style="list-style-type: none"> Post on social media and/or on an organization web site 	<ul style="list-style-type: none"> Post on social media and/or on an organization web site Screen film at office or other available free or low-cost rental space accessible to youth 	<ul style="list-style-type: none"> Post on social media and/or on an organization web site Rent a local movie theater or other large venue accessible to youth
Screening Event	<ul style="list-style-type: none"> Hold no event Provide incentives or raffles to youth who engage with video online (if utilizing social media) 	<ul style="list-style-type: none"> Have Gen.M staff facilitate games and/or activities at the event Conduct a raffle (if the budget allows) 	<ul style="list-style-type: none"> Have Gen.M staff facilitate games and/or activities at the event Conduct a raffle (if the budget allows) Invite local youth artists to perform at the event

SECTION 3: IMPLEMENTING GENDER MATTERS

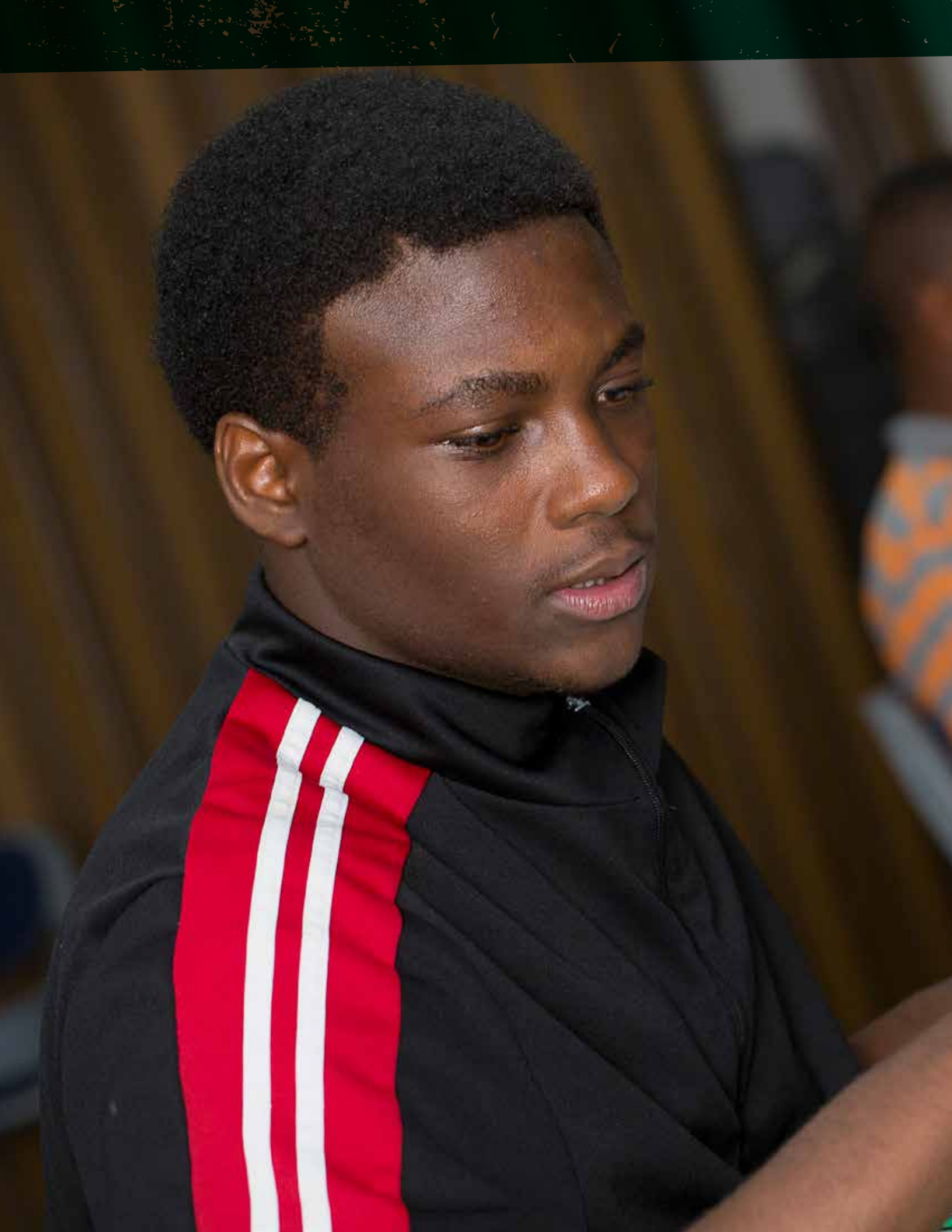
Tasks	Model 1 Less Expensive	Model 2 More Expensive	Model 3 Most Expensive
Comments	<ul style="list-style-type: none"> This model is best for programs with limited budget, resources, and time. It allows existing staff to implement all aspects of the video review process without additional equipment, expenses, or training. Filming is conducted using smartphone/tablet video functions, and videos are screened only through the organization web site or on social media site(s). This model does not include a screening event to enable further interaction with program participants; however, it does reinforce key messages among youth engaged in social media efforts. 	<ul style="list-style-type: none"> This model is best for programs with a mid-range budget and resources. Staff will need additional training on using free or low-cost video editing software to create a highlight reel of review activities. A small-scale screening event allows for further interaction with program participants, and staff can facilitate fun games and activities to supplement the screening. 	<ul style="list-style-type: none"> This model is the most robust; a version of it was used during the Austin study's implementation of the Gender Matters program. This model involves hiring a film crew to document workshops and develop a short documentary highlighting the curriculum's key messages. The documentary is screened at a large event, to which all program participants are invited to attend and with which they might assist in planning, depending upon their level of involvement. Youth artists are invited to perform at the event, to enhance youth engagement.

KEY TAKEAWAY POINTS

Gender Matters is an evidence-informed program designed to prevent teen pregnancy and STIs. It comprises three complementary components: 1) a 20-hour Gen.M curriculum; 2) a social media campaign; and 3) youth-generated video messages about gender, relationships, sexual decision making, and the prevention of pregnancy and STIs .

1. Key to the Gender Matters theory of change is the influence of gender norms on sexual decision making. Awareness about the role gender plays in forming sexual attitudes and behaviors is woven into every session. Youth are encouraged to question the costs to themselves, their partners, and their peers of abiding by rigid, inequitable gender norms and to explore healthy, equitable ways of expressing their manhood and womanhood.
2. Ten tasks should be completed before implementing Gender Matters. The Gender Matters Implementation Readiness Questionnaire (Appendix 7) is a useful tool to help practitioners track the completion of these tasks.
3. The Gen.M Code is a core component of the program. Its six statements were deliberately developed to encapsulate the curriculum's core messages. By the completion of the program, these six messages should be well-integrated in participants' minds, so that they can retrieve them with ease.
4. The Gen.M prop kit contains all of the materials needed to implement the entire curriculum (see Appendix 10 for the full list). The prop kits allow facilitators to collect what they need for Gen.M sessions in one place, as well as to avoid losing or damaging supplies.
5. High-performing Gen.M facilitators should be able to demonstrate mastery of the key content and facilitator skills, as well as holding the professional values and beliefs required to implement Gen.M effectively.
6. Implementing a social media campaign along with the Gen.M curriculum is an effective way to enhance the curriculum's learning objectives and to help participants recollect and internalize key curriculum concepts and messages. The Gender Matters social media campaign involves interacting with participants through social media outlets after the conclusion of the curriculum component. The social media campaign is recommended, but it is not considered a core component to the Gender Matters intervention.

7. Each of Gen.M's five sessions ends with a review activity that encourages youth to reflect on, and put into their own words, the key learnings from the session. During these reviews, youth participants engage in an interactive process while being videotaped. The video footage is used to reinforce key messages from the curriculum and to showcase participants' personal interpretations of the session's concepts and messages.



SECTION 4

MAKING ADAPTATIONS TO GENDER MATTERS

BACKGROUND

The Gender Matters development team recognizes that many evidence-based programs can and should be adapted to make them more suitable to the unique characteristics of youth from a multiplicity of backgrounds and localities.

With the need for flexibility in mind, the Gen.M curriculum was developed in a way that allows it to be modified to meet the needs of diverse youth populations, while still maintaining fidelity to Gen.M's core content and pedagogical and implementation components.

This section of the *Gender Matters Program Implementation and Adaptation Manual* covers the following topics:

- Collection of formative data
- Green, yellow, and red light adaptations to Gen.M
- Charting of adaptations
- Key takeaway points

COLLECTION OF FORMATIVE DATA

It is unlikely that the youth you serve will be exactly like the youth served by the Gender Matters research study conducted in Austin, Texas. As such, it is recommended that you take some time to investigate the context, beliefs, attitudes, behaviors, etc., of the youth population that your organization will serve and use these data to inform the adaptations you make to Gender Matters. Examining your organization's and/or partnering organization's capacity will also give you data to help inform adaptations. In addition to making more strategic adaptations by using the formative data you collect, you can also use these data to justify adaptations to funders and other stakeholders.

More information about how to conduct a formative assessment for adapting and implementing Gen.M is found on page 94 of this manual and page 6 in the *Gender Matters Evaluation Compendium*.

GREEN, YELLOW, AND RED LIGHT ADAPTATIONS OF GEN.M

Consistent with adaptation research conducted by the CDC's Division of Reproductive Health (Rolleri et al., 2014), this section of the *Gender Matters Program Implementation and Adaptation Manual* presents three general types of adaptations that can be made to a curriculum.

GREEN LIGHT ADAPTIONS

Green Light Adaptations are considered safe changes—that is, they do not compromise the program's core components. Examples of green light adaptations are updating or customizing statistics or health information, customizing role plays, and making activities more interactive. They might include the following:

- **Replacing or modifying icebreakers.** The icebreakers found in Gen.M are used to set the stage for a particular topic, and to reinforce concepts and learning objectives. Icebreakers may be modified as long as the modification achieves the same learning objective.
- **Adding or substituting discussion questions.** Each large-group discussion includes a list of specific questions to be asked of youth. These discussion questions can be rephrased using language that is more comfortable for the facilitator, or in some cases they may be reordered to keep the discussion from being choppy or repetitive. Discussion questions can be added, as long as the additions do not move the group away from the primary topic being discussed.
- **Customizing role-play scenarios.** Role plays are a crucial pedagogical approach to participants' acquisition and retention of new skills and are a required teaching method of Gen.M. However, as long as the information and intended learning objectives in the role play remain the same, the wording, setting, and names used in the role plays may be changed to make them more relevant to the youth population being served.
- **Updating reproductive health information.** Reproductive health information (e.g., new contraceptive methods, new treatment for STIs), epidemiological data, available community resources, and laws related to adolescent sexual and reproductive health change frequently. Therefore, this type of information should be updated regularly for Gen.M to remain current and accurate.
- **Changing the video review format.** Each Gen.M session ends with a video recording of youth engaged in an activity designed to reinforce key behavioral and attitudinal messages from the session. For more information about how to make green light adaptations to the video review format, see page 73 of this manual.

- **Tailoring language to youth culture.** Gen.M was designed for a primarily Latino and African American youth population aged 14–16 and living in an urban area. Programs being implemented with youth of other ethnicities, cultures, or settings should tailor activities to be more inclusive and contemporary for the population being served.

YELLOW LIGHT ADAPTATIONS

Yellow Light Adaptations are changes that should be made with caution. Consulting an expert in behavior change theory and curriculum development is highly recommended. Examples of yellow light adaptations are adding activities to address additional determinants or changing the order of the sessions. They might include the following:

- **Changing the number and duration of sessions.** Gender Matters was originally implemented over a series of five four-hour sessions carried out in sequence over five days. Meeting less frequently or meeting for shorter or longer sessions is possible, but the sequence of activities should remain the same. It is also advised that no more than a week elapse between sessions. One example of how Gen.M's five sessions can be divided and implemented over a series of 15 60–90-minute lessons can be found in Appendix 6. Implementing an activity in less than one hour is not advised, as this will compromise the flow and continuity of the activity.
- **Adding or changing the sequence of activities.** The sessions and activities in Gen.M are presented in a deliberate order, allowing for each activity to build on previous ones in content, skill, and level of challenge. Changing the order of activities may decrease the participants' mastery of skills and information. If it is necessary to shift activities (e.g., to accommodate a time schedule), consult with the Gen.M curriculum developers or another curriculum/learning theory specialist, who can advise about appropriate ways to move activities.
- **Adding activities to address additional risk and protective factors.** It is possible that your program may want to address additional health determinants besides those covered in Gen.M. For example, it is possible that the youth you are serving need basic information about puberty and reproductive anatomy and physiology that is beyond the scope of Gen.M. In addition, the use of alcohol and other drugs may be so prevalent that it is having a major impact on the sexual decision making of the youth you are serving and needs to be incorporated into the program.

Although it is possible to add additional activities to address other determinants, this should be done with caution. Trying to cover too many topics may make the program overly long and may cause retention or implementation issues. Additionally, attempting to cover too many objectives runs the risk of diluting positive outcomes. It is better to cover a limited number of strategically selected topics and cover them well than to try to cover too many topics in a superficial way.

- **Changing video review activities.** Conducting a video review at the end of each Gen.M session is a core pedagogical component that works to reinforce key messages from the curriculum and highlight what youth have learned, in their own words, through their personal interpretations. The activities used to elicit discussion (e.g., gender fishbowl) as part of the video review may be adapted, as long as the opportunity for reflection, discussion of key attitudinal and behavioral messages, and personalization of the session's information and skills remains.
- **Implementing in an alternative setting, with an alternative group size.** Gen.M was designed for groups of 12–15 mixed-sex participants in an out-of-school setting. Based on the study team's experience, this is an ideal number of participants for facilitating interactive activities while also keeping to the allotted time. Too large or too small of a group will likely compromise Gen.M's core components and ultimately impact what participants learn.

If your team has no choice but to work with a group of 25–30 youth (typical classroom size), you may want to consider:

- Breaking the class into two rooms with two sets of facilitators. This would allow all learners the time needed for interactivity and skill practice.
 - Conducting activities in two parts on separate days, to allow for the additional time facilitators will need.
 - Arranging for a double period (90 minutes), which would provide more time to conduct the lesson with a larger group.
- **Changing the male/female facilitation team.** Gen.M is cofacilitated by one male and one female facilitator. Working together and modeling cooperative relationships is important in demonstrating gender equality and respect.

It is possible that your team may lack eligible male health education facilitators or may lack funding for two facilitators. In these cases, consider other options, such as bringing in an intern or a past participant to cofacilitate. If all options are exhausted, it is possible to conduct the workshops with one facilitator, but this may compromise curriculum delivery.

- **Working with same-sex vs. mixed-sex groups.** Gen.M applies a gender-synchronized approach by giving youth an opportunity to learn and work together around issues that impact their relationships. An example of one activity is the Gender Fishbowl in Session 3, in which young men and women listen to each other discuss their own gendered experiences, develop empathy for each other's experiences, and learn how to better support their peers in resisting harmful gender norms. If your program is working with same-sex participants only, consider how to engage participants in thinking about how the other sex would think or feel about a particular topic.

RED LIGHT ADAPTATIONS

Red Light Adaptations should be avoided, since they compromise or eliminate one or more of a program's core components. Examples of red light adaptations are shortening the program, removing condom activities, and replacing interactive activities with lectures. They might include the following:

- **Shortening the program by omitting activities or sessions.** The determinants addressed in Gen.M are addressed by multiple activities throughout the curriculum. Some of the more complex determinants are given more time in the curriculum. Therefore, reducing the number of activities designed to affect each determinant may have a negative effect on behavioral outcomes. Gen.M curriculum developers do not recommend omitting any activities or sessions.
- **Reducing or eliminating discussions at the end of an activity.** Most Gen.M activities conclude with a large-group discussion designed to summarize key messages, as well as to get youth to reflect, comment on, and personalize information. The discussions are an integral part of each activity. Reducing or eliminating these discussions will likely weaken the program's outcomes and the participants' acquisition of skills and knowledge.
- **Removing video reviews.** Conducting video reviews at the end of each Gen.M session is an important pedagogical component that helps to reinforce key learning messages from the curriculum and to highlight what youth have learned. The video reviews are based on theories of cognitive dissonance, gist messages, and social norms.¹⁷ While green and yellow light adaptations can be made to the format or type of an activity used to elicit discussion, the activity itself cannot be removed. Doing so would compromise the curriculum's core content and pedagogical components.
- **Removing condom activities.** Learning to use a condom correctly is a critical sexual health skill that requires practice to master and gain self-efficacy. The condom demonstration and accompanying practice activities in Gen.M are essential to affect changes in behavior and attitudes regarding condom use. None of the Gen.M condom activities should be removed.
- **Failing to repeat and reinforce key messages and The Gen.M Code.** Gen.M places a strong emphasis on reinforcing key messages about healthy sexual behaviors and attitudes. The repetition of key messages is based on several of the health behavior change theories that ground the Gender Matters program, as well as on the *17 Characteristics of Effective Sex and HIV Education Programs* (Kirby, Laris, & Rolleri, 2007). Although the repetition of the messages may appear redundant, it is important that the facilitators do so.

¹⁷ See Section 1 of this manual for information about these theories.

CHARTING OF ADAPTATIONS

In Appendix 5, you will find a Gen.M Adaptation Log that will help your team think about, record, and assess the effectiveness of the adaptations made to Gen.M. Fidelity monitoring logs designed to record changes made to each Gen.M session, as well as potential compromises in the curriculum's core content and pedagogical and implementation components, are found in the *Gender Matters Evaluation Compendium*.

KEY TAKEAWAY POINTS

1. Gen.M can and should be adapted to make it suitable to the unique characteristics of the youth being served, as long as the adaptations do not compromise the curriculum's core components.
2. Implementing organizations should collect formative assessment data to make informed and strategic adaptations.
3. Green light adaptations are considered safe changes—that is, they do not compromise the program's core components.
4. Yellow light adaptations are changes that should be made with caution. Consulting Gender Matters developers (by contacting EngenderHealth) or an expert in behavior change theory and curriculum development is highly recommended.
5. Red light adaptations should be avoided, since they compromise or eliminate one or more of a program's core components.
6. Implementing organizations should record and assess the outcome of the adaptations made to Gen.M, and they should reevaluate the effectiveness of adaptations as needed.
7. If implementing Gen.M means making many yellow light adaptations or making red light adaptations, your project team may want to reconsider your program choice. Another adolescent pregnancy/STI prevention curriculum may better fit the needs of your youth and/or organization.



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SUPPLEMENTAL READING AND OTHER RESOURCES

GEN.M
GENDER MATTERS

ADVOCATING FOR EVIDENCE-BASED PROGRAMS

Advocates for Youth

www.advocatesforyouth.org/publications/publications-a-z/1350-talking-points-on-science-based-approaches-and-programs

ETR Associates

<http://recapp.etr.org/Recapp/index.cfm?fuseaction=pages.EducatorSkillsDetail&PageID=93>

Planned Parenthood Federation of America

www.plannedparenthood.org/educators/implementing-sex-education

Sexuality Information and Education Council of the United States (SIECUS)

www.siecus.org/index.cfm?fuseaction=page.viewpage&pageid=521&grandparentID=477&parentID=514

BEHAVIOR CHANGE THEORY

BDI Logic Model

<http://recapp.etr.org/recapp/documents/BDILOGICMODEL20030924.pdf>

Cognitive Dissonance

www.nature.com/scientificamerican/journal/v207/n4/pdf/scientificamerican1062-93.pdf

Fuzzy Trace Theory

www.idml.medicine.arizona.edu/Articles/Gist%20is%20the%20Grist%20Fuzzy%20Trace%20Theory%20and%20the%20New%20Intuitionis.pdf

Social Learning Theory

<http://recapp.etr.org/recapp/index.cfm?fuseaction=pages.TheoriesDetail&PageID=380>

Social Norms Approach

www.alanberkowitz.com/articles/social%20norms%20approach-short.pdf

Theory of Reasoned Action

<http://recapp.etr.org/recapp/index.cfm?fuseaction=pages.TheoriesDetail&PageID=517>

CONTRACEPTION

American Academy of Pediatrics

www.aap.org/en-us/about-the-aap/aap-press-room/Pages/AAP-Updates-Recommendations-on-Teen-Pregnancy-Prevention.aspx

The American Congress of Obstetricians and Gynecologists

www.acog.org

Centers for Disease Control and Prevention

www.cdc.gov/reproductivehealth/unintendedpregnancy/contraception.htm

Planned Parenthood Federation of America

www.plannedparenthood.org

EVIDENCE-BASED ADOLESCENT PREGNANCY AND STI PREVENTION PROGRAMS

Office of Adolescent Health

www.hhs.gov/ash/oah/

Registries of Programs Effective in Reducing Youth Risk Behaviors

www.cdc.gov/healthyyouth/adolescenthealth/registries.htm

U.S. Department of Health and Human Services

<http://tppevidencereview.aspe.hhs.gov>

FACILITATION SKILLS

Classroom Management

<http://recapp.etr.org/recapp/index.cfm?fuseaction=pages.EducatorSkillsDetail&PageID=78>

Condom Demonstration

Planned Parenthood

www.youtube.com/watch?v=EdSq2HB7jqU

AIDS United AmeriCorps

www.youtube.com/watch?v=gXlcEJhYVuc

Facilitating Role Plays

<http://recapp.etr.org/recapp/index.cfm?fuseaction=pages.EducatorSkillsDetail&PageID=94>

Large-Group Discussion

<http://recapp.etr.org/recapp/index.cfm?fuseaction=pages.EducatorSkillsDetail&PageID=82>

Managing Small-Group Work

<http://recapp.etr.org/recapp/index.cfm?fuseaction=pages.EducatorSkillsDetail&PageID=87>

FORMATIVE ASSESSMENT

Getting To Outcomes 2004: Promoting Accountability Through Methods and Tools for Planning, Implementation, and Evaluation

www.rand.org/content/dam/rand/pubs/technical_reports/2004/RAND_TR101.pdf

Introduction to Program Evaluation for Public Health Programs: A Self-Study Guide

www.cdc.gov/EVAL/guide/introduction/index.htm

GENDER

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Rolleri, L. 2013. *Research Facts and Findings: Gender Norms and Sexual Health Behaviors*. Ithaca, NY: ACT for Youth Center of Excellence, Cornell University. www.actforyouth.net/resources/rf/rf_gender2_1213.pdf

Rolleri, L. 2013. *Research Facts and Findings: Can Gender Norms Change?* Ithaca, NY: ACT for Youth Center of Excellence, Cornell University. www.actforyouth.net/resources/rf/rf_gender3_1213.pdf

INCLUSION OF LGBTQ YOUTH

Colorado Youth Matter

www.hhs.gov/ash/oah/oah-initiatives/teen_pregnancy/training/Assests/inclusive_forall.pdf

GLSEN

<http://glsen.org/educate/resources>

SIECUS

<http://siecus.org/index.cfm?fuseaction=page.viewpage&pageid=605&grandparentID=477&parentID=591>

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REPRODUCTIVE ANATOMY AND PHYSIOLOGY

Columbia University

www.columbia.edu/itc/hs/pubhealth/modules/reproductiveHealth/anatomy.html

KidsHealth

<http://kidshealth.org/en/teens/female-repro.html>

<http://kidshealth.org/en/teens/male-repro.html>

SEXUALLY TRANSMITTED INFECTIONS

American Sexual Health Association

www.ashasexualhealth.org

Centers for Disease Control and Prevention

www.cdc.gov/std/

www.cdc.gov/hiv/

SOCIAL MEDIA

General

Pew Research Center Internet, Science and Tech: Teens Fact Sheet

www.pewinternet.org/fact-sheets/teens-fact-sheet/

MOZ

The Beginner's Guide to Social Media

<http://moz.com/beginners-guide-to-social-media>

Search Engine Journal

Top 10 Tools for Managing Your Social Media Accounts

www.searchenginejournal.com/top-10-tools-managing-social-media-accounts/87843/

Online Texting Services

ClubTexting

www.clubtexting.com

EZTexting

www.eztexting.com

Joopz

www.joopz.com/

Pinger

www.pinger.com/tfw/

Editing Software

Adobe Premiere Pro CC

www.adobe.com/products/premiere.html

Final Cut Pro X

www.apple.com/final-cut-pro/

iMovie

www.apple.com/mac/imovie/

Movie Maker

<http://windows.microsoft.com/en-us/windows-live/movie-maker>

Pinnacle

www.pinnaclesys.com/PublicSite/us/Products/studio/standard/

TEEN PREGNANCY

Centers for Disease Control and Prevention

www.cdc.gov/teenpregnancy/

www.cdc.gov/HealthyYouth/sexualbehaviors/

National Campaign to Prevent Teen and Unplanned Pregnancy

<http://thenationalcampaign.org>

Office of Adolescent Health

www.hhs.gov/ash/oah/



**WHEN IN
DOUBT**

[CHILL OUT]

APPENDIXES

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Appendix 1**GEN.M'S THEORY-OF-CHANGE LOGIC MODEL: AT-A-GLANCE VERSION**

Gen.M's theory-of-change logic model was built using the Behavior-Determinant-Intervention (BDI) Logic Model process (Kirby, 2004). The logic model demonstrates the links among Gender Matters' goal, behavioral outcomes, determinants, and learning activities. Note that the logic model applies only to Component 1: The 20-Hour Curriculum and Component 3: Youth-Generated Video Messages. Component 2: Social Media is not considered a core component of the Gender Matters intervention.



Curriculum Activities Designed to Change Determinants

- 1.3 Gender Messages
- 1.4 Gender in the Media
- 2.2 Healthy Relationships and Deal-Breakers
- 2.3 Assertive Communication
- 2.4 What Is Consent?
- 3.3 Sexual Decision Making
- 3.5 Video Review: Gender Fishbowl
- 4.1 Session 4 Check-In
- 4.2 Keeping the Egg and Sperm Apart
- 4.3 The Truth about STIs
- 4.4 How to Use Condoms
- 5.2 Birth Control Report
- 5.3 The Clinic

- 1.2 Values Clarification
- 1.3 Gender Messages
- 1.4 Gender in the Media
- 2.2 Healthy Relationships and Deal-Breakers
- 3.4 Ways to Show You Care
- 3.5 Video Review: Gender Fishbowl
- 4.4 How to Use Condoms
- 4.5 Condom Obstacles
- 4.7 Video Review: Condom Slogans
- 5.2 Birth Control Report
- 5.3 The Clinic

Determinants of Behaviors

- KNOWLEDGE**
1. Gender norms and how they affect health
 2. Gender norms and how they affect relationships
 3. Gender norms and how they affect sexual decision making
 4. How the media affect development of gender norms
 5. Characteristics of healthy and unhealthy relationships
 6. Three communication styles
 7. Consent and its importance
 8. Acceptable and unacceptable reasons to have sex
 9. Personal limits
 10. Male and female reproductive systems
 11. How a pregnancy occurs
 12. STI transmission, symptoms, testing, treatment, and prevention
 13. Benefits of condoms
 14. Contraceptive methods
 15. Sexual and reproductive health (SRH) clinic services

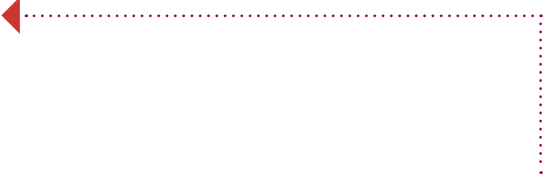
- ATTITUDES/VALUES/BELIEFS**
1. Healthy and equitable values and attitudes about gender
 2. Empathy for other's gendered experience
 3. Positive attitude about knowing and acting against deal-breakers
 4. Positive attitude about alternatives to sex
 5. Positive attitude about using condoms
 6. Positive attitude about contraception
 7. Positive attitude about visiting an SRH clinic

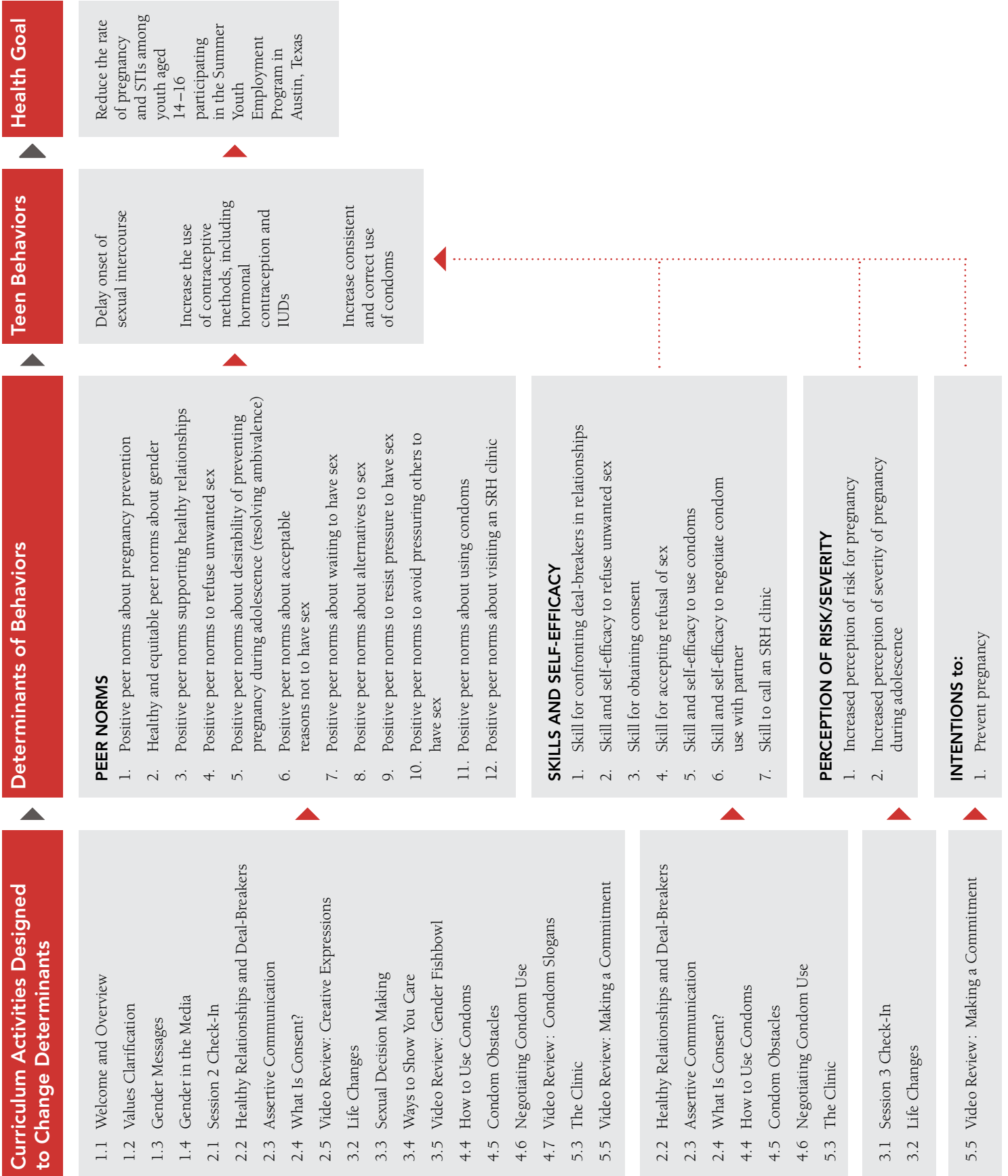
Teen Behaviors

- Delay onset of sexual intercourse
- Increase the use of contraceptive methods, including hormonal contraception and IUDs
- Increase consistent and correct use of condoms

Health Goal

Reduce the rate of pregnancy and STIs among youth aged 14–16 participating in the Summer Youth Employment Program in Austin, Texas





Appendix 2

**GEN.M'S THEORY-OF-CHANGE LOGIC MODEL:
COMPREHENSIVE VERSION**

Gen.M’s Theory-of-Change Logic Model: Comprehensive Version (Continued)

Gender Matters curriculum activities designed to change determinants	Determinants of teen sexual behaviors	Teen sexual behaviors	Health Goal
Knowledge			
<p>1.3 <i>Gender Messages</i>—critical reflection on messages youth receive about gender</p> <p>1.4 <i>Gender in the Media</i>—small group work and large-group discussion</p> <p>3.5 <i>Video Review: Gender Fishbowl</i>—youth share and empathize with others’ gendered experiences</p> <p>2.2 <i>Healthy Relationships and Deal-Breakers</i>—small-group analysis and large-group discussion</p> <p>5.2 <i>Birth Control Report</i>—small-group research and large-group discussion</p>	<p>1. Gender norms and how they affect health</p>	<p>1. Delay onset of sexual intercourse</p> <p>2. Increase the use of contraceptive methods, including hormonal contraception and IUDs</p> <p>3. Increase consistent and correct use of condoms</p>	<p>Reduce the rate of pregnancy and STIs among youth aged 14–16 participating in the Summer Youth Employment Program in Austin, Texas</p>
<p>2.2 <i>Healthy Relationships and Deal-Breakers</i>—small-group analysis and large-group discussion</p>	<p>2. Gender norms and how they affect relationships</p>		

Gen.M’s Theory-of-Change Logic Model: Comprehensive Version (Continued)

Gender Matters curriculum activities designed to change determinants	Determinants of teen sexual behaviors	Teen sexual behaviors	Health Goal
<p>3.3 <i>Sexual Decision Making</i>—brainstorming about reasons why teens have sex, small-group analysis of teen couple case studies, large-group discussion, and individual reflection</p>	<p>3. Gender norms and how they affect sexual decision making</p>		
<p>1.4 <i>Gender in the Media</i>—small-group work and large-group discussion</p>	<p>4. How the media affect development of gender norms</p>		
<p>2.2 <i>Healthy Relationships and Deal-Breakers</i>—brainstorming of healthy and unhealthy relationship characteristics, large-group sort, large-group discussion, and individual reflection</p>	<p>5. Characteristics of healthy and unhealthy relationships</p>		
<p>2.3 <i>Assertive Communication</i>—mini-lecture, small-group work, and large-group discussion</p>	<p>6. Three communication styles</p>		
	<p>7. Consent and its importance</p>		
<p>2.4 <i>What Is Consent?</i>—skill demonstration, role-play demonstration, large-group discussion</p>			



Gen.M’s Theory-of-Change Logic Model: Comprehensive Version (Continued)

Gender Matters curriculum activities designed to change determinants	Determinants of teen sexual behaviors	Teen sexual behaviors	Health Goal
<p>3.3 <i>Sexual Decision Making</i>—brainstorming about reasons why teens have sex, small-group analysis of teen couple case studies, large-group discussion, and individual reflection</p>	<p>8. Acceptable and unacceptable reasons to have sex</p>		
<p>3.3 <i>Sexual Decision Making</i>—brainstorming about reasons why teens have sex, small-group analysis of teen couple case studies, large-group discussion, and individual reflection</p>	<p>9. Personal limits</p>		
<p>4.1 <i>Session 4 Check-In</i>—minilecture</p>	<p>10. Male and female reproductive systems</p>		
<p>4.2 <i>Keeping the Egg and Sperm Apart</i>—minilecture</p>	<p>11. How a pregnancy occurs</p>		
<p>4.2 <i>Keeping the Egg and Sperm Apart</i>—minilecture</p>	<p>12. STI transmission, symptoms, testing, treatment, and prevention</p>		
<p>4.3 <i>The Truth about STIs</i>—large-group discussion</p>	<p>13. Benefits of condoms</p>		
<p>4.4 <i>How to Use Condoms</i>—condom line-up, demonstration of correct condom use, skill practice, and large-group discussion</p>			

Gen.M's Theory-of-Change Logic Model: Comprehensive Version (Continued)

Gender Matters curriculum activities designed to change determinants	Determinants of teen sexual behaviors	Teen sexual behaviors	Health Goal
5.2 <i>Birth Control Report</i> —small-group research and large-group discussion	14. Contraceptive methods		
5.3 <i>The Clinic</i> —brainstorming and group discussion	15. SRH clinic services		
Attitudes/Values/Beliefs			
1.2 <i>Values Clarification</i> —values about gender	1. Healthy and equitable values and attitudes about gender		
1.3 <i>Gender Messages</i> —critical reflection on messages youth receive about gender			
1.4 <i>Gender in the Media</i> —small-group work and large-group discussion			
3.5 <i>Video Review: Gender Fishbowl</i> —youth share and empathize with others' gender experience	2. Empathy for others' gendered experience		
2.2 <i>Healthy Relationships and Deal-Breakers</i> —brainstorming of healthy and unhealthy relationship characteristics, large-group sort, large-group discussion, and individual reflection	3. Positive attitude about knowing about and acting against deal-breakers		
3.4 <i>Ways to Show You Care</i> —brainstorming and large-group discussion	4. Positive attitude about alternatives to sex		



Gen.M’s Theory-of-Change Logic Model: Comprehensive Version (Continued)

Gender Matters curriculum activities designed to change determinants	Determinants of teen sexual behaviors	Teen sexual behaviors	Health Goal
<p>4.4 <i>How to Use Condoms</i>—condom steps and demonstration, skills practice, and large-group discussion</p> <p>4.5 <i>Condom Obstacles</i>—brainstorming of possible barriers, small-group work to find ways to overcome barriers, gallery walk, and large-group discussion</p> <p>4.7 <i>Video Review: Condom Slogans</i>—small group work</p>	<p>5. Positive attitude about using condoms</p>		
<p>5.2 <i>Birth Control Report</i>—small-group research and large-group discussion</p>	<p>6. Positive attitude about using contraception</p>		
<p>5.3 <i>The Clinic</i>—brainstorming and large-group discussion</p>	<p>7. Positive attitude about visiting an SRH clinic</p>		
Peer Norms			
<p>1.1 <i>Welcome and Overview</i>—group juggle icebreaker and large-group discussion about Gender Matters</p> <p>5.5 <i>Video Review: Making a Commitment</i>—individual work and reflection, large-group discussion</p>	<p>1. Positive peer norms about pregnancy prevention</p>		

Gen.M's Theory-of-Change Logic Model: Comprehensive Version (Continued)

Gender Matters curriculum activities designed to change determinants	Determinants of teen sexual behaviors	Teen sexual behaviors	Health Goal
<p>1.2 <i>Values Clarification</i>—discussion about values</p> <p>1.3 <i>Gender Messages</i>—critical reflection on messages youth receive about gender</p> <p>1.4 <i>Gender in the Media</i>—small-group work and large-group discussion</p> <p>3.5 <i>Video Review: Gender Fishbowl</i>—youth share and empathize with others' gendered experiences</p> <p>2.1 <i>Session 2 Check-In</i>—a cold wind blows opener</p> <p>2.5 <i>Video Review: Creative Expressions</i></p>	<p>2. Healthy and equitable peer norms about gender</p>		
<p>2.2 <i>Healthy Relationships and Deal-Breakers</i>—brainstorming of healthy and unhealthy relationship characteristics, large-group sort, large-group discussion, and individual reflection</p> <p>2.4 <i>What Is Consent?</i>—small-group analysis and large-group discussion</p> <p>2.5 <i>Video Review: Creative Expressions</i></p>	<p>3. Positive peer norms supporting healthy relationships</p>		



Gen.M's Theory-of-Change Logic Model: Comprehensive Version (Continued)

Gender Matters curriculum activities designed to change determinants	Determinants of teen sexual behaviors	Teen sexual behaviors	Health Goal
2.3 <i>Assertive Communication</i> —skill demonstration, role-play demonstration, and large-group discussion	4. Positive peer norms to refuse unwanted sex		
3.2 <i>Life Changes</i> —large-group discussion about rewards from delaying pregnancy	5. Positive peer norms about desirability of preventing pregnancy during adolescence (resolving ambivalence)		
5.5 <i>Video Review: Making a Commitment</i> —reflections on realities of teen pregnancy	6. Positive peer norms about acceptable reasons to have sex		
3.3 <i>Sexual Decision Making</i> —brainstorming reasons why teens have sex, small-group analysis of case studies, large-group discussion, and individual reflection	7. Positive peer norms about waiting to have sex		
3.3 <i>Sexual Decision Making</i> —brainstorming about reasons why teens have sex, small-group analysis of teen couple case studies, large-group discussion, and individual reflection	8. Positive peer norms about alternatives to sex		
3.4 <i>Ways to Show You Care</i> —brainstorming and large-group discussion	9. Positive peer norms to resist pressure to have sex		
2.3 <i>Assertive Communication</i> —practice using refusal skills to say no to sex			

Gen.M's Theory-of-Change Logic Model: Comprehensive Version (Continued)

Gender Matters curriculum activities designed to change determinants	Determinants of teen sexual behaviors	Teen sexual behaviors	Health Goal
<p>2.4 <i>What Is Consent?</i>—brainstorming ways to ask for and confirm consent</p> <p>4.4 <i>How to Use Condoms</i>—condom line-up, demonstration of correct condom use, skills practice, and large-group discussion</p> <p>4.5 <i>Condom Obstacles</i>—brainstorming of possible barriers, small-group work to find ways to overcome barriers, gallery walk, and large-group discussion</p> <p>4.6 <i>Negotiating Condom Use</i>—skills demonstration, role-play practice, large-group discussion</p> <p>4.7 <i>Video Review—Condom Slogans</i></p>	<p>10. Positive peer norms to avoid pressuring others to have sex</p> <p>11. Positive peer norms about using condoms</p>	<p>12. Positive peer norms about visiting an SRH clinic</p>	
Skills and Self-Efficacy			
<p>2.2 <i>Healthy Relationships and Deal-Breakers</i>—brainstorming of healthy and unhealthy relationship characteristics, large-group sort, large-group discussion, and individual reflection</p>	<p>1. Skills for confronting deal-breakers in relationships</p>		



Gen.M’s Theory-of-Change Logic Model: Comprehensive Version (Continued)

Gender Matters curriculum activities designed to change determinants	Determinants of teen sexual behaviors	Teen sexual behaviors	Health Goal
2.3 <i>Assertive Communication</i> —skills demonstration, role play practice, and large-group discussion	2. Skill and self-efficacy to refuse unwanted sex		
2.4 <i>What Is Consent?</i> —minilecture, small-group work, and large-group discussion	3. Skills for obtaining consent		
2.4 <i>What Is Consent?</i> —minilecture, small-group work, and large-group discussion	4. Skill for accepting refusal of sex		
4.4 <i>How to Use Condoms</i> —condom line-up, demonstration of correct condom use, skills practice, and large-group discussion	5. Skill and self-efficacy to use condoms		
4.5 <i>Condom Obstacles</i> —brainstorming of possible barriers, small-group work to find ways to overcome barriers, gallery walk, and large-group discussion	6. Skill and self-efficacy to negotiate condom use with partner		
4.6 <i>Negotiating Condom Use</i> —skills demonstration, role-play practice, and large-group discussion			

Gen.M's Theory-of-Change Logic Model: Comprehensive Version (Continued)

Gender Matters curriculum activities designed to change determinants	Determinants of teen sexual behaviors	Teen sexual behaviors	Health Goal
5.3 <i>The Clinic</i> —brainstorming and large group discussion	7. Skill to call an SRH clinic		
Perception of Risk			
3.1 <i>Session 3 Check-In</i>	1. Increased perception of risk of pregnancy		
3.2 <i>Life Changes</i> —large-group discussion about rewards from delaying pregnancy	2. Increased perception of severity of pregnancy during adolescence		
Intentions			
5.5 <i>Video Review: Making a Commitment</i>	1. Prevent pregnancy		

Appendix 3**GEN.M DETERMINANT ANALYSIS,
BY SESSION**

The table that follows on pages 116–120 shows which determinants are addressed in the various sessions of GenM. “Xs” inserted in the cells of this table indicate the number of times that each listed determinant is addressed in each Gen.M session. If no “X” is shown, this means that the particular determinant is not addressed in that Gen.M session.

Gen.M Determinant Analysis, by Session (Continued)

Determinant	Session 1: Understanding Gender	Session 2: Healthy Relationships	Session 3: Big Decisions	Session 4: Skills for Preventing Pregnancy	Session 5: Taking Action to Prevent Teen Pregnancy
Knowledge (15)					
Knowledge about gender norms and how they affect health	XXX	X			X
Knowledge about how gender norms affect relationships		X			
Knowledge about how gender norms affect sexual decision making			X		
Knowledge about how the media affect development of gender norms	X				
Knowledge about characteristics of healthy and unhealthy relationships		XX			
Knowledge of three communication styles		X			
Knowledge about consent and its importance		X			
Knowledge about acceptable and unacceptable reasons to have sex			X		
Knowledge of personal limits			X		
Knowledge about male and female reproductive system				XX	
Knowledge about how a pregnancy occurs					x

Gen.M Determinant Analysis, by Session (Continued)

Determinant	Session 1: Understanding Gender	Session 2: Healthy Relationships	Session 3: Big Decisions	Session 4: Skills for Preventing Pregnancy	Session 5: Taking Action to Prevent Teen Pregnancy
Knowledge about STI transmission, symptoms, testing, treatment, and prevention				X	
Knowledge about benefits of condoms				X	
Knowledge about contraceptive methods					X
Knowledge about SRH clinic services					X
Perception of Risk (2)					
Increased perception of risk for pregnancy			X		
Increased perception of severity of pregnancy during adolescence			XX		
Attitudes/Values/Beliefs (7)					
Healthy and equitable values and attitudes about gender	XXX				
Empathy for others' gendered experience	X				
Positive attitude about knowing and acting against deal-breakers		X			
Positive attitude about alternatives to sex			X		

Gen.M Determinant Analysis, by Session (Continued)

Determinant	Session 1: Understanding Gender	Session 2: Healthy Relationships	Session 3: Big Decisions	Session 4: Skills for Preventing Pregnancy	Session 5: Taking Action to Prevent Teen Pregnancy
Positive attitude about using condoms				XXX	
Positive attitude about using contraception					X
Positive attitude about visiting an SRH clinic					X
Peer Norms (12)					
Positive peer norms about pregnancy prevention	X				XX
Healthy and equitable peer norms about gender	XXXX	XX			
Positive peer norms supporting healthy relationships		XXX			
Positive peer norms to refuse unwanted sex		X			
Positive peer norms about desirability of preventing pregnancy during adolescence (resolving ambivalence)			XX		
Positive peer norms about acceptable reasons not to have sex			X		
Positive peer norms about waiting to have sex			X		
Positive peer norms about alternatives to sex			X		

Gen.M Determinant Analysis, by Session (Continued)

Determinant	Session 1: Understanding Gender	Session 2: Healthy Relationships	Session 3: Big Decisions	Session 4: Skills for Preventing Pregnancy	Session 5: Taking Action to Prevent Teen Pregnancy
Positive peer norms to resist pressure to have sex			X		
Positive peer norms to avoid pressuring others to have sex			X		
Positive peer norms about using condoms				XXXX	
Positive peer norms about visiting an SRH clinic					x
Skills/Self-Efficacy (7)					
Skill for confronting deal-breakers in relationships		X			
Skill and self-efficacy to refuse unwanted sex		X			
Skill to obtain consent		X			
Skill for accepting refusal of sex		X			
Skill and self-efficacy to use condoms				X	
Skill and self-efficacy to negotiate condom use with partner				XX	
Skill to call an SRH clinic					X
Intentions (1)					
Intention to prevent pregnancy			X		

Appendix 4

GEN.M CURRICULUM PEDAGOGY METHOD ANALYSIS

Note: In the following table, a bullet (•) inserted in the cell of the table indicates whether each listed pedagogical method is used in a Gen.M session; the number of bullets shows the number of times the method is used. If no bullet is shown, this means that the particular pedagogical method is not used in that Gen.M session.

Teaching Method	Session					
	1	2	3	4	5	Total
Brainstorming	•	•	•••	•	••	8
Clinic Phone Calls				•		1
Condom Line-Up				•		1
Condom Use Skills Practice				•		1
Critical Thinking	•					1
Skills Demonstration		•		••		3
Fishbowl		•				1
Forced Choices	•					1
Gallery Walk				•		1
Icebreaker	•	•	•	•	•	5
Individual Work		•	••		•	4
Large-Group Discussion	••••	•••	•••	••••	•••	17
Large-Group Sort		•				1
Minilecture	••••	•••	•	•••	•••	14
Pair, Share	•					1
Questions Bag			•			1

Gen.M Curriculum Pedagogy Method Analysis (Continued)

Teaching Method	Session					
	1	2	3	4	5	Total
Role Play		•		•		2
Small-Group Work	•	•	••	••	••	8
Spider Web					•	1
Survey			•			1
Youth-Generated Video Messages	•	•	•	•	•	5

GEN.M ADAPTATION TRACKING LOG

Directions: Using the formative assessment data that you gathered about the group of youth you intend to serve and your assessment of your organization’s capacity to implement the Gen.M curriculum, briefly describe the adaptation and the reason for making the adaptation to the Gen.M activity. Code the adaptation as a green, yellow, or red light, based on the definitions and descriptions found in the Making Adaptations to Gen.M section of this manual. After implementing the adapted activity, comment on the outcome. Do you think the adaptation enhanced or weakened the activity? Will you continue to use the adapted activity? Will you adapt it again? How?

An example of how the log might be completed is found on page 123, with examples from Session 1, Activity 1.4, and Session 4, Activity 4.4.

Gen.M Adaptation Tracking Log (Continued)

Gen. M Action	Description of Adaptation	Reason for Adaptation	Green Light	Yellow Light	Red Light	Outcome
Session 1: Understanding Gender						
1.4: Gender in the Media	Implemented with a single-sex group (girls only). Asked girls how they thought boys' responses to the questions would be different.	Implemented in girls-only programming		X	Stop and reconsider	Lesson was somewhat weakened. Students tried to come up with what they thought boys would think, but boys were not there to speak for themselves. However, the students were able to comment freely on their reactions to media examples. Will continue to use adaptation with girl-only groups without any changes.
Session 4: Skills for Preventing Pregnancy						
4.4: How to Use Condoms	Removed the condom practice from this activity	School district requirements			Stop and reconsider X	Lesson was weakened significantly. Students still had lots of questions about how condoms look and feel. They had a hard time remembering steps to put a condom on and could not demonstrate due to school requirements; thus, two learning objectives were not met. This adaptation should not be used in future groups.

Gen.M Adaptation Tracking Log (Continued)

Gen. M Action	Description of Adaptation	Reason for Adaptation	Green Light	Yellow Light	Red Light	Outcome
Session 1: Understanding Gender						
1.2: Values Clarification					Stop and reconsider	
1.3: Gender Messages					Stop and reconsider	
1.4: Gender in the Media					Stop and reconsider	

Gen.M Adaptation Tracking Log (Continued)

Gen. M Action	Description of Adaptation	Reason for Adaptation	Green Light	Yellow Light	Red Light	Outcome
1.5: Video Review—It's About Me					Stop and reconsider	
Session 2: Healthy Relationships						
2.1: Session 2 Check-In					Stop and reconsider	
2.2: Healthy Relationships and Deal-Breakers					Stop and reconsider	

Gen.M Adaptation Tracking Log (Continued)

Gen. M Action	Description of Adaptation	Reason for Adaptation	Green Light	Yellow Light	Red Light	Outcome
2.3: Assertive Communication					Stop and reconsider	
2.4: What Is Consent?					Stop and reconsider	
2.5: Video Review—Creative Expressions					Stop and reconsider	

Gen.M Adaptation Tracking Log (Continued)

Gen. M Action	Description of Adaptation	Reason for Adaptation	Green Light	Yellow Light	Red Light	Outcome
Session 3: Big Decisions						
3.1: Session 3 Check-In					Stop and reconsider	
3.2: Life Changes					Stop and reconsider	
3.3: Sexual Decision Making					Stop and reconsider	

Gen.M Adaptation Tracking Log (Continued)

Gen. M Action	Description of Adaptation	Reason for Adaptation	Green Light	Yellow Light	Red Light	Outcome
3.4: Ways to Show You Care					Stop and reconsider	
3.5: Video Review—Gender Fishbowl					Stop and reconsider	
Session 4: Skills for Preventing Pregnancy						
4.1: Session 4 Check-In					Stop and reconsider	

Gen.M Adaptation Tracking Log (Continued)

Gen. M Action	Description of Adaptation	Reason for Adaptation	Green Light	Yellow Light	Red Light	Outcome
4.2: Keep-ing the Egg and Sperm Apart					Stop and reconsider	
4.3: The Truth about STIs					Stop and reconsider	
4.4: How to Use Condoms					Stop and reconsider	

Gen.M Adaptation Tracking Log (Continued)

Gen. M Action	Description of Adaptation	Reason for Adaptation	Green Light	Yellow Light	Red Light	Outcome
4.5: Condom Obstacles					Stop and reconsider	
4.6: Negotiating Condom Use					Stop and reconsider	
4.7: Video Review—Condom Slogans					Stop and reconsider	

Gen.M Adaptation Tracking Log (Continued)

Gen. M Action	Description of Adaptation	Reason for Adaptation	Green Light	Yellow Light	Red Light	Outcome
Session 5: Taking Action to Prevent Teen Pregnancy						
5.1: Session 5 Check-In					Stop and reconsider	
5.2: Birth Control Report					Stop and reconsider	
5.3: The Clinic					Stop and reconsider	

Gen.M Adaptation Tracking Log (Continued)

Gen. M Action	Description of Adaptation	Reason for Adaptation	Green Light	Yellow Light	Red Light	Outcome
5.4: Game Show Review					Stop and reconsider	
5.5: Video Review— Making a Commit-ment					Stop and reconsider	
5.6: Closing Activity— Spider Web					Stop and reconsider	

Appendix 6

DIVIDING THE GEN.M CURRICULUM INTO 60–90-MINUTE LESSONS

The table below presents a possible way to divide Gen.M activities to create 60–90-minute sessions. Shorter sessions may be needed to replicate the curriculum in school-based or after-school settings. Note that this suggested division has not been tested. The table simply provides a suggestion of how Gen.M's five four-hour sessions could be divided into shorter time frames.

Possible Organization of Gen.M Activities to Create 60–90-Minute Lessons	Total Time of Lesson
Lesson 1	
Activity 1.1: Welcome and Overview (1 hour)	1 hour, 25 minutes
Activity 1.2: Values Clarification (25 minutes)	
Lesson 2	
Activity 1.3: Gender Messages (1 hour, 10 minutes)	1 hour, 10 minutes
Lesson 3	
Activity 1.4: Gender in the Media (50 minutes)	1 hour, 10 minutes
Activity 1.5: Video Review—It's about Me (20 minutes)	
Lesson 4	
Activity 2.1: Session 2 Check-In (20 minutes)	1 hour, 10 minutes
Activity 2.2: Healthy Relationships and Deal-Breakers (50 minutes)	
Lesson 5	
Activity 2.3: Assertive Communication (1 hour, 5 minutes)	1 hour, 5 minutes

Dividing the Gen.M Curriculum into 60–90-Minute Lessons (Continued)

Possible Organization of Gen.M Activities to Create 60–90-Minute Lessons	Total Time of Lesson
Lesson 6	
Activity 2.4: What Is Consent? (50 minutes)	1 hour, 30 minutes
Activity 2.5: Video Review—Creative Expressions (40 minutes)	
Lesson 7	
Activity 3.1: Session 3 Check-In (20 minutes)	1 hour, 25 minutes
Activity 3.2: Life Changes (1 hour, 5 minutes)	
Lesson 8	
Activity 3.3: Sexual Decision Making (1 hour, 15 minutes)	1 hour, 15 minutes
Lesson 9	
Activity 3.4: Ways to Show You Care (25 minutes)	1 hour, 5 minutes
Activity 3.5: Video Review—Gender Fishbowl (40 minutes)	
Lesson 10	
Activity 4.1: Session 4 Check-In (25 minutes)	1 hour, 30 minutes
Activity 4.2: Keeping the Egg and Sperm Apart (35 minutes)	
Activity 4.3: The Truth about STIs (30 minutes)	
Lesson 11	
Activity 4.4: How to Use Condoms (45 minutes)	1 hour, 10 minutes
Activity 4.5: Condom Obstacles (25 minutes)	
Lesson 12	
Activity 4.6: Negotiating Condom Use (35 minutes)	1 hour, 5 minutes
Activity 4.7: Video Review—Condom Slogans (30 minutes)	

Dividing the Gen.M Curriculum into 60–90-Minute Lessons (Continued)

Possible Organization of Gen.M Activities to Create 60–90-Minute Lessons	Total Time of Lesson
Lesson 13	
Activity 5.1: Session 5.1 Check-In (25 minutes)	1 hour, 25 minutes
Activity 5.2: Birth Control Report (1 hour)	
Lesson 14	
Activity 5.3: The Clinic (25 minutes)	1 hour, 15 minutes
Activity 5.4: Game Show Review (50 minutes)	
Lesson 15	
Activity 5.5: Video Review—Making a Commitment (45 minutes)	1 hour, 5 minutes
Activity 5.6: Closing Activity—Spider Web (20 minutes)	

Appendix 7

GENDER MATTERS IMPLEMENTATION READINESS QUESTIONNAIRE

Instructions: As a team, review the questions on the following pages and determine whether your team is prepared or not prepared in regard to the task described in the question. If you are not prepared, discuss a plan for completing the preparation task, including a timeline. All of the tasks described here should be completed *before* Gender Matters activities are implemented.

Gender Matters Implementation Readiness Questionnaire (Continued)

Task	Yes or No?	Plan for Completion	Timeline
Implementing Organization and Community			
Does your organization have the commitment of senior leadership? For example, has Gender Matters become part of your organization's overall program portfolio and/or strategic plan? Has adequate funding been allotted? Can senior leadership speak about Gender Matters?			
Has your project team developed a protocol for dealing with resistance and/or controversy associated with implementing Gender Matters? For example, is there a written list of frequently asked questions and responses, designation of staff who will respond to comments/inquiries, etc.?			
Has your team conducted a formative assessment of organizational capacity? See Conduct a Brief Formative Assessment (page 49) for a list of guiding questions. Another helpful resource is found on the Office of Adolescent Health web site: www.hhs.gov/ash/oah/oah-initiatives/teen_pregnancy/training/Assests/organizationalcapacity-assessment.pdf			
Staff and Staff Capacity			
Has your organization hired the appropriate number of staff with the required qualifications and competencies? (See Implementing Gender Matters [page 47] for a list of staff roles and responsibilities.)			

Gender Matters Implementation Readiness Questionnaire (Continued)

Task	Yes or No?	Plan for Completion	Timeline
<p>Does your project team have mastery of the content and facilitation skills needed to implement Gender Matters effectively? (See Implementing Gender Matters [page 61] for a list of facilitator competencies.)</p>			
<p>Does the project team have the comfort and confidence to talk about sensitive matters such as gender, teen pregnancy, HIV and other STIs, sexual anatomy, methods of contraception, and sexual decision making?</p>			
<p>Have all members of the project team received formal training/orientation in the implementation of Gender Matters?</p>			
<p>Have Gender Matters curriculum facilitators attended a Gender Matters training of facilitators?</p>			

Gender Matters Implementation Readiness Questionnaire (Continued)

Task	Yes or No?	Plan for Completion	Timeline
Have facilitators practiced the delivery of the Gender Matters curriculum, so that they feel confident in delivering the curriculum to youth?			
Youth			
Has your team conducted a formative assessment of the youth it intends to serve? (See Conduct a Brief Formative Assessment [page 49] for a list of guiding questions.)			
Does your team have a plan to recruit and maintain youth attendance?			
Does your organization require parental consent for youth to participate in Gender Matters? If so, have parental consent forms been collected?			

Gender Matters Implementation Readiness Questionnaire (Continued)

Task	Yes or No?	Plan for Completion	Timeline
Will your organization use incentives for youth? If so, have these been procured?			
Materials and Resources			
Has your team gathered materials for the Gender Matters prop kits?			
Has your team assembled the Gender Matters prop kits?			
Has your team secured filming equipment for recording youth-generated video messages at the end of each Gender Matters session?			

Gender Matters Implementation Readiness Questionnaire (Continued)

Task	Yes or No?	Plan for Completion	Timeline
Has a workshop space been secured for Gender Matters?			
Has your team established relationships and linkages with community reproductive health care services?			
Has your team created a referral list with other community resources that may be helpful to youth?			
Social Media Campaign (if implementing)			
Has your team selected a platform for implementing a social media campaign?			

Gender Matters Implementation Readiness Questionnaire (Continued)

Task	Yes or No?	Plan for Completion	Timeline
Has your team set up a social media group page with appropriate platform management tools?			
Has your team drafted a list of messages to be delivered over the course of Gender Matters implementation?			
Has your team drafted a list of content and activities to be posted on the chosen social media platform?			
Has your team obtained participants' cellphone numbers to prepare for the SMS text campaign?			



Gender Matters Implementation Readiness Questionnaire (Continued)

Task	Yes or No?	Plan for Completion	Timeline
Has your team selected an online texting service to manage the SMS text messages?			
Has your team selected a video editing model?			
Planning and Administrative			
Has your team completed a realistic work plan?			
Has your team completed a realistic budget?			

Gender Matters Implementation Readiness Questionnaire (Continued)

Task	Yes or No?	Plan for Completion	Timeline
<p>Evaluation</p> <p>Has your team planned a process evaluation, including the development of instruments?</p>			
<p>Have staff been trained in the administration of these instruments?</p>			
<p>Has your team established a system for quality assurance, fidelity monitoring, and supportive staff supervision?</p>			

Appendix 8

EXAMPLE OF YOUTH RECRUITMENT FLYER

GENDER MATTERS

Register Today!

September 12 at 12:00 PM
Anyschool, Anytown USA

Everyone who participates will receive
 [DESCRIPTION OF INCENTIVES]!

Gender Matters is a fun afternoon program that includes:

- *Workshops*
- *Social media activities*
- *A short film about you and your friends!*

Here are some of the things you will learn about...

- *What it means to be a healthy, strong, and smart man or woman*
- *How to postpone sexual activity until you're ready*
- *How to have healthy relationships*
- *How to choose a birth control method, including abstinence, condoms, and contraceptives*
- *Reproductive and sexual health services that are available in [YOUR TOWN OR CITY]*

To register for Gender Matters, contact
 [CONTACT PERSON] by e-mail [EMAIL ADDRESS]
 or phone [PHONE NUMBER].



EXAMPLE OF PARENTAL CONSENT FORM

Print on your organization's letterhead]

[DATE]

Dear Parent/Guardian:

I am writing to tell you about a new program that we will be offering the young people who attend [NAME OF YOUR PROGRAM], as well as ask for your signature on the form below, which will give your consent for your child's participation.

About the Gender Matters Program

Over the next few weeks, your child will be offered a program called Gender Matters at [LOCATION]. Gender Matters is a program designed to promote sexual health among adolescents aged 14–16.

The Gender Matters program has three parts: 1) [# OF SESSIONS and # OF HOURS] interactive workshops; 2) a social media campaign; and 3) video messages developed by youth about gender, healthy relationships, and sexual decision making.

Overall, the program will cover the following topics:

- Positive messages about what it means to be a man or a woman
- Information about delaying sexual activity
- Information about healthy and unhealthy relationships
- Information about family planning methods, including abstinence and contraceptives
- Information on condoms and demonstration of correct condom use
- Information about youth-friendly clinical services available in [NAME OF YOUR TOWN/CITY].

You are welcome to review a copy of the Gender Matters curriculum. Please contact [NAME OF CONTACT PERSON AND CONTACT INFORMATION], who will set up a time for you to review the curriculum.

In addition to the 20-hour curriculum, youth will be invited to participate in a private, supervised Facebook group page. They may also sign up to receive informational text messages from Gender Matters staff about the issues discussed in the workshops.

Example of Parental Consent Form (Continued)

By signing this consent form, you are also giving [NAME OF YOUR ORGANIZATION] permission to take photographs and make audio and video recordings of participants involved in the Gender Matters program. These photos/videos may be used by [NAME OF YOUR ORGANIZATION] in news releases, web sites, television, publications, videos, etc. Your child may decline at any time to have his or her photograph taken or be audio- or video-recorded during the implementation of the Gender Matters program.

Waiver of Liability

Should any injury occur to your child during their participation in Gender Matters activities or events, [NAME OF YOUR ORGANIZATION] will not be held liable, financially or otherwise. You agree to take full responsibility for any financial expenses and will not seek any damages.

In the case of accident or injury, you hereby authorize first aid– and CPR-certified staff to perform necessary first aid, and you understand and agree that staff will not be held liable and that you will not seek any damages. In the event of apparent acute illness or injury, as determined by the supervising staff member, you authorize [NAME OF YOUR ORGANIZATION] staff to send or transport the participant to the nearest hospital and arrange for emergency medical treatment for your child, as necessary.

If you have any questions about this letter or the Gender Matters program, please do not hesitate to contact me.

Please return the consent form below no later than [DUE DATE] to [CONTACT PERSON].

Sincerely,

[NAME OF REPRESENTATIVE AT YOUR ORGANIZATION]
[TITLE]
[PHONE]
[EMAIL]

Example of Parental Consent Form (Continued)

Consent to Participate in Gender Matters

I agree to have my child participate in the Gender Matters program. I understand that my child is free to stop participation in the program at any time.

Child's name: _____

Parent/Guardian's Name: _____

Parent/Guardian's Signature: _____

Date: _____

Contact Information for Parent/Guardian

Address: _____

City: _____ State: _____ Zip: _____

Phone (day): _____

Phone (evening): _____

E-mail: _____

Emergency Contact

Name: _____

Relationship to child: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone : _____

Alternative Phone: _____

Appendix 10

LIST OF MATERIALS REQUIRED FOR GEN.M CURRICULUM IMPLEMENTATION

Items for General Facilitation of Gen.M	Quantity and Suggestions for Maintenance
Thick markers, various colors	Enough for participants to share. Replace when dried out or go missing.
Scissors	Enough for half of group to share.
Pens	Enough for each participant and extras. Replenish as needed.
Blank 8.5x11" paper	Enough for each participant and extras. Resupply before starting curriculum.
Attendance form (if needed)	New sheet before starting curriculum sessions.
Group agreements poster	Laminate. Replace when worn or damaged.
Gender Matters Code poster	Laminate. Replace when worn or damaged.
Question Box	Replace when damaged.
Blue painters tape	Replenish when running low.
Pocket folders for participants' materials and handouts	Enough for each participant and a few extras. Replenish before starting curriculum.
Items for General Facilitation of Gen.M	Quantity and Suggestions for Maintenance
Name tags (if needed)	Enough for each participant. Restock when running low.
Two flipchart pads	Replace when running low or damaged.
Flipchart easels	At least one.
3x5" index cards	Full pack of cards. Replenish as needed.
Video camera (smartphone is fine)	At least one.

List of Materials Required for Gen.M Curriculum Implementation (Continued)

Items for Specific Gen.M Activities	Activity	Quantity and Suggestions for Maintenance
Three soft, medium-sized balls	1.1	Replace when any are worn, damaged, or missing.
Two signs: "Agree" and "Disagree"	1.2	Laminate. Replace when worn or damaged.
5x7" index cards	1.3	Pack of 100 cards. Replenish as needed.
Statements for "A Cold Wind Blows"	2.1	Replace when worn or damaged.
Two Signs: "Healthy" and "Unhealthy"	2.2	Laminate. Replace when worn or damaged.
One set of "Relationship Behavior" cards	2.2	Laminate. Replace when worn or damaged.
Items for Specific Gen.M Activities	Activity	Quantity and Suggestions for Maintenance
One green card and one red card per participant	2.4	Enough of each color for each participant. Laminate. Replace when worn or damaged.
Two paper bags for picking assignments	2.5	Replace when damaged.
Penis models ²⁰ —Enough for participants to work in groups of three	4.4	Replace when damaged.
Condoms	4.4	Enough for facilitator demonstration, two per participant, and extras. Replenish when running low.
Paper towels	4.4	Replenish when running low.
Two sets of eight condom step cards	4.4	Laminate. Replace when worn or damaged.
Samples of contraceptive methods (IUD, pill pack, patch, vaginal ring, implant, condom) ²¹	5.2	Replace when damaged.

List of Materials Required for Gen.M Curriculum Implementation (Continued)

Signs for each contraceptive station	5.2	Laminate. Replace when worn or damaged.
Planned Parenthood's "Birth Control Choices for Teens" brochures	5.2	Enough for each participant and extras. Resupply when running low or new information is available.
Local family planning clinics handouts	5.3	Enough for each participant and extras. Resupply when running low or new information is available.
Items for Specific Gen.M Activities	Activity	Quantity and Suggestions for Maintenance
Three to five laminated booklets of Virtual Clinic Tour	5.3	Replace when worn or damaged.
Small prizes for game winners	5.4	Restock before Session 5.
Large ball of yarn	5.7	Replace when worn or damaged.

²⁰ Conduct a web search with a phrase like "penis models for the purposes of condom demonstration" and several companies will appear from which you can choose.

²¹ Many Planned Parenthoods sell a birth control kit for educational purposes.

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