

## Locally-Developed HIV/AIDS Prevention Intervention Profile



### New Jersey

**Project Title:** Teen Prevention Education Program (PEP)

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**Population(s) served by this intervention:** Adolescents 15-18 years of age of all races/ethnicities, genders and sexual orientations, enrolled in public high schools across New Jersey.

**Length of time this intervention has been funded:** 15 years

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### Goals and objectives:

With the overarching goal of increasing students' knowledge, attitudes, skills and behaviors associated with healthy decision-making, the New Jersey Teen Prevention Education Program (Teen PEP) is a comprehensive, sexual health program designed to:

- Offer stakeholder teams effective resources and strategies to create a culture of positive peer pressure where responsible sexual decisions are valued
- Equip students with the knowledge, motivation and skills to avoid sexually transmitted infections, HIV and unintended pregnancy
- Develop leadership and communication skills among students
- Create a culture and climate of positive peer pressure where responsible sexual decisions are valued and supported
- Provide opportunities for students to practice essential life skills and discuss sexual health issues with adults and peers in an atmosphere of mutual respect and factual discussion
- Provide school and community stakeholder teams with increased knowledge, skills and abilities to effectively implement and sustain a proven-effective sexual health peer education program
- Equip school personnel and other youth-serving adults with the training and resources to effectively teach sexuality education to students
- Equip parents/guardians with the knowledge and skills to discuss sex and sexuality with their children

### Intervention specific activities:

Teen PEP is guided by Social Learning Theory, the Health Belief Model and Principles of Youth Leadership Development. It is a voluntary program implemented in high schools that apply to participate in the statewide network. Carefully selected junior and/or senior students who enroll in Teen PEP become a cohesive team of trained peer educators who are knowledgeable, effective and capable sexual health advocates and role models. Teen PEP is implemented as a sexual health class that meets daily (or the equivalent) throughout the school year and is team-taught by program advisors who use the structured 16-unit [Teen PEP Course Curriculum](#). Through this course, student peer educators earn credit toward their graduation and receive the information about sexual health and the skills needed to facilitate innovative prevention outreach workshops.

Once peer educators master the information and skills needed to educate others, they conduct structured and scripted [Outreach Workshops](#), under the

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supervision of their faculty advisors. The workshops that Teen PEP peer educators facilitate are presented to freshmen and/or sophomore students, parents and appropriate audiences identified by each school's Teen PEP stakeholder team. These workshops focus not only on sexual health information, but on the equally important topic of enhancing the critical skills needed to promote teen sexual health (e.g., communication (with partners and parents), problem-solving, decision-making, negotiation, refusal skills and self-management skills) as well. Workshops address the following topics:

- Postponing Sexual Involvement
- Pregnancy Prevention
- HIV/AIDS Prevention
- Sexually Transmitted Infection Prevention
- The Impact of Alcohol and Other Drugs on Sexual Decision-making
- Homophobia Reduction
- Sexual Harassment Prevention
- Dating Violence Prevention
- Date Rape Prevention

The students participating in Teen PEP sexual health outreach workshops are required to obtain parental consent prior to attending the workshops.

The faculty who team-teach the Teen PEP course receive special training in sexual health and the coordination of activity-based learning. A minimum of two faculty at each Teen PEP school attend two three-day residential trainings in their first year and a one-day advanced training workshop annually. Faculty advisor training is critical to equipping advisors with the skills needed to manage a successful Teen PEP program.

### **Social determinants of health/co-morbidities addressed by this intervention:**

STD  
Substance use/abuse  
Teen pregnancy  
Teen sexual assault

### **Costs of developing and implementing this intervention:**

The New Jersey Department of Health and Senior Services (NJDHSS), Division of HIV/AIDS Services currently provides \$568,996 in federal and state HIV prevention funding annually to support activities that are part of the Teen PEP initiative in over 45 New Jersey high schools. An additional

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\$36,000 of CDC DASH funds annually go directly to Newark, NJ schools implementing Teen PEP.

Two or three teachers funded by their local school district implement and facilitate the Teen PEP course of peer educators at all participating schools. Teacher capacity building training and technical assistance is provided by staff of the Princeton Center for Leadership Training and HiTOPS, Inc.; both agencies are the primary recipients of the NJDHSS health service grants that fund the bulk of Teen PEP activities.

### Evaluation findings related to this intervention:

In collaboration with Rutgers University, Teen PEP was evaluated from 2000-2003. More recently, Teen PEP was evaluated through a partnership with Johns Hopkins University School of Medicine. The following are results from these studies:

After participating in Teen PEP, peer educators, as compared to students who did not participate in the program are more likely to:

- Know accurate sexual health information <sup>1, 2</sup>
- Believe that they can refuse risky and unwanted situations <sup>2</sup>
- Report responsible decision-making <sup>2</sup>
- Think ahead regarding the consequences of their sexual choices <sup>2</sup>
- Communicate about sexual health issues with parents, friends, and partners <sup>1</sup>
- Wait longer to have sex <sup>1</sup>
- Stop having sex <sup>1</sup>
- Reduce the number of sex partners <sup>1</sup>
- Access reproductive health care services more often <sup>1</sup>
- Use or report the intention to use birth control and condoms more often <sup>1, 2</sup>
- Plan to ask a partner to be tested for HIV and other sexually transmitted infections <sup>2</sup>

After participating in Teen PEP, workshop participants, as compared to students who did not participate in the program are more likely to:

- Communicate about sexual health issues with partners <sup>1</sup>
- Wait longer to have sex <sup>1</sup>
- Stop having sex <sup>1</sup>
- Have sex less often <sup>1</sup>
- Abstain from sex while under the influence of alcohol and other drugs <sup>1</sup>
- Use birth control more often <sup>1</sup>

Teen PEP Evaluation Studies: Rutgers University (2000-2003) <sup>1</sup>, Johns Hopkins School of Medicine (2009)<sup>2</sup>

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### **Lessons Learned:**

- Peer-led, interactive sexual health education activities provide vital opportunities for impacting teen knowledge, attitudes and behavior related to sexual health issues.
- Effective school-based peer education in comprehensive sexual health requires involvement of community stakeholders, including school administrators, teachers, parents and students.
  - Obtaining stakeholder buy-in strategies: Contextualize HIV within other factors/influences; Invite school leadership to informational workshops that include skit and workshop demonstrations, evaluation result presentations, and school leadership/parent/student testimonials; Department of Health covers cost of all teacher training and CBA for schools
- Intensive teacher capacity building training and school infrastructure development are needed to enhance quality assurance of school-based teen peer-led comprehensive sexual health interventions.
  - Additionally, if only focus on building peer educators then have to start over every year because student population is transient. Training faculty advisors changes the infrastructure of the school and assists in program maintenance from year to year.
- Development of school-based comprehensive sexual health education interventions will require substantial support from federal, state and local health authorities.

### **Other information you should know, related to this intervention:**

- The successes of the Teen PEP intervention are largely a byproduct of the successful collaboration of the agencies that worked side-by-side in the development, implementation, and evaluation of this initiative: The New Jersey Department of Health and Senior Services, Princeton Center for Leadership Training, and HiTOPS, Inc.—government partnering with community-based agencies.
- State and local health departments may have to play a significant role in the development of statewide comprehensive sexual health education competencies, resources and networks.
- Effective comprehensive peer-led sexual health programs should be grounded in the most current research findings related to adolescent learning.

### **The Way Forward:**

In addition to New Jersey, Teen PEP has been operating in North Carolina since 2007. The Teen PEP team is planning for a national expansion and is

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looking for partners to realize this vision. Those from states other than New Jersey or North Carolina who are interested in starting Teen PEP can contact Dr. Chavonne Lenoir to discuss pricing and a customized package of training and consultation services.

### **Additional Resources:**

Teen PEP Website: [www.teenpep.org](http://www.teenpep.org)