



The Dibble Institute

Resources for Teaching Relationship Skills
to Teens and Young Adults

Organization:	Northern Ohio Recovery Association (NORA)
Program Name:	Building Bridges to Recovery Youth Prevention Program
Funding:	SAMHSA Prevention Navigator grant
What problem is being solved?	Prevention of Substance Use Disorder (SUD) and STD/HIV infections in teens and young adults.
Curricula Used:	Love Notes
Curricula Benefits:	<ul style="list-style-type: none"> • Love Notes effectively focuses on preventing both SUD and STD/HIV in both school and community settings in 13 lessons. • The romantic relationship focus of the curriculum tends to both engage and retain youth in the program. • Outcomes of the LN curriculum in a randomized control trial are highly relevant to HIV prevention.^[1] • Evidence shows connections between unhealthy relationships and significantly higher rates of substance use and substance misuse.^{[2][3][4]} • Alternatively, high-quality romantic relationships are associated with lower substance abuse in adolescence.^{[5][6][7]} <p>Thus, promoting healthy relationships through relationship skills education is likely to support mitigation of adolescence substance use and sexual activities.</p>
Target Audience:	High and alternative school students grades 9-12 from across the Cleveland, Ohio area.
Audience Demographics:	Male and female adolescents (ages 14-19), living in impoverished urban neighborhoods. More than 85% are African American.
Class Size:	Approximately 16-35 youth per class.
Program Setting:	Public schools
Location of Instruction:	Cleveland, Ohio including a high school, an all-boys high school, and an alternative school
Length of Instruction (# of Sessions and hours per session):	<ul style="list-style-type: none"> • Health classes: 90 minutes – at least once a week for an entire semester. • Advisory periods: 45 minutes, 14 – 16 lessons are conducted, 2-3 days a week.

Instructors:	<ul style="list-style-type: none"> • NORA staff facilitate Love Notes in the schools. • New instructors often attend sessions to observe program facilitation prior to attending training. • All instructors attend Love Notes training before facilitating the curriculum. • New program instructors are scheduled to facilitate with a senior instructor for implementation support. • Instructors typically work in pairs and bring their own strengths to the classroom.
Adaptations	<ul style="list-style-type: none"> • Play culturally relevant music at the beginning of sessions as students entered. • Introduce a “feelings wheel” with certain lessons to help youth identify emotions during a particular lesson. • Add additional HIV/STD and SUD content to support NORA’s mission of providing testing and treatment services in addition to prevention education.
Student Workbooks:	Students use the Love Notes journals
Incentives to Students:	None
Observable Outcomes:	<ul style="list-style-type: none"> • Students have more knowledge about healthy relationships and understanding of warning signs of unhealthy relationships • Students have voiced that Love Notes has made them think before actually becoming involved sexually with a partner first. • Love Notes invites participants to think about drugs and alcohol and the damage that it can do to the body, and how when under the influence adversely affects an individual’s decision making when it comes to safe sex. • Love Notes allows for participants to think and make wise choices for themselves. • Students receiving Love Notes programming are motivated to adopt and use referral resources for being tested for HIV and STD’s because they became familiar with NORA’s services.
Challenges:	<ul style="list-style-type: none"> • Engaging youth at the start of the program can be difficult so completing the Colors Personality Inventory can help connect with them. • Keeping the teens engaged when they are not involved in a fun activity. • High turnover rates of facilitation teams can slow the rate of implementation resulting in challenges with student engagement strategies and classroom management techniques, thus it is recommended that newer facilitators are partnered with facilitators that are more tenured.

Tips:

- Love Notes gives educators the opportunity to facilitate student discussion. Educators should present in a way so they are able to talk with youth “where they currently are in life.”
- Some youth received Love Notes on a Friday then a Monday, which helped youth retain the content from session to session.
- The program is easy to roll-out and get started, however, finding ways to engage youth first is a programmatic must.
- Instructors are becoming Emotional CPR (eCPR) certified and looking to employ another Dibble curriculum, [Mind Matters](#), to assist with implementation challenges.
- NORA attends youth focused community events to build brand awareness and spark conversations with community and youth collaboration initiatives (for example: back to school hip hop extravaganza, or similar events).

[1] [Barbee, A. P., et.al. \(2016\). *Impact of two adolescent pregnancy prevention interventions on risky sexual behavior: A three-arm cluster randomized control trial*. American Journal of Public Health, 106, S85-S90. doi:10.2105/AJPH.2016.303429](#)

[2] Ackard DM, et.al. (2007). *Long-term impact of adolescent dating violence on the behavioral and psychological health of male and female youth*. Journal of Pediatrics, 151(5): 476-81. doi:[10.1016/j.jpeds.2007.04.034](#)

[3] Collins WA, et.al. (2009). *Adolescent romantic relationships*. Annul Review of Psychology (60). 631-52. doi: 10.1146/annurev.psych.60.110707.163459

[4] Exner-Cortens D, et.al. (2013). *Longitudinal associations between teen dating violence victimization and adverse health outcomes*. Pediatrics, 131(1), 71-78. Doi: 10.1542/peds.2012-1029

[5] Silverman JG, et.al. (2004). *Dating violence and associated sexual risk and pregnancy among adolescent girls in the United States*. Pediatrics, 114(2), 220-225.doi: 10.1542/peds.114.2.e220.

[6] Silverman JG, et.al. (2001). *Dating violence against adolescent girls and associated substance use, unhealthy weight control, sexual risk behavior, pregnancy, and suicidality*. Journal of the American medical Association, 286(5), 572-9. Doi: 10.1001/jama.286.5.572.

[7] Ackard DM, , Eisenberg ME, and Neumark-Sztainer D. (2007).