It's Your Game. Keep it Real.

United States
Ross Shegog

<table>
<thead>
<tr>
<th>Project Summary</th>
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<td>Elevator Pitch</td>
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**Concise Summary:** Help us pitch this solution! Provide an explanation within 3-4 short sentences.

Computer-based curriculum to prevent HIV, STD, and pregnancy in middle school children.

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<th>Location</th>
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<td>Project Street Address</td>
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<td>Project City</td>
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<td>Project Province/State</td>
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<td>Project Postal/Zip Code</td>
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<th>Year work began:</th>
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<tr>
<td>2002</td>
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<th>Focus of activity</th>
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<td>Technology</td>
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**YouTube Upload**

**Project URL (include HTTP://)**

Plot your innovation within the mosaic of solutions

- Which of these barriers is the primary focus of your work?
  - Insufficient Evidence that Games Improve Health

- Which of the principles is the primary focus of your work?
  - Community Health

If you believe some other barrier or principle should be included in the mosaic, please describe it and how it would affect the positioning of your initiative in the mosaic:

This field has not been completed

<table>
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<th>Innovation</th>
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**What is your signature innovation in one sentence?**

Computer-based curriculum to prevent HIV, STD, and pregnancy in middle school children.

**Describe your innovation. What makes your idea unique and different than others doing work in the field?**

The "It's Your Game" curriculum features classroom-based and computer-based components that represent a unique contribution to sexuality education. The curriculum provides the opportunity to use the advantages of group-process in the classroom (role-modeling, journaling, discussion) with the advantages of a computer-based gaming environment (confidential, individualized, norm-based, motivational). Components of the computer-based component include an integrated wireless LAN system, a 3D virtual world "mall" substrate, embedded FLASH-based interactive activities, and peer role model and expert videos, and embedded pre- and post-test questions.

**What barriers exist that are creating the problem your innovation is hoping to address/change?**

Public health data indicates the urgent need for effective HIV, STI and pregnancy prevention interventions at the middle school level to help delay or mitigate the consequences of early sexual activity. To date, sexuality education programs have shown differential impact by gender or by sexual experience. The effectiveness of computer-based gaming technology offers a promising solution.

**Delivery Model:** How do you implement your innovation and apply it to the challenge/problem you are addressing.
It's your game is implemented as a 12 lesson curriculum (for both 7th and 8th grade) in middle schools. Children attend classroom sessions which comprise group activities or individualized computer-based lessons. Children use the computer in the classroom wearing headphones and transmit anonymous data via wireless LAN to a facilitator's computer for further group process. "It's Your Game" has been evaluated in a randomized controlled trial in 10 Texas middle schools. Baseline data have been collected from a largely minority sample of over 1,300 7th graders comprising approximately 57% female, 44% black, and 42% Hispanic, with a mean age 12.5 (SD=0.69) years. Impact and outcome data were collected at 5, 14 and 24 months post-baseline. 

**How do you plan to scale your innovation?**

Future scaling for research and dissemination is planned suitable for ready access by local and international communities.

## Impact

**Provide one sentence describing your impact.**

The 24 month follow-up data indicates significant efficacy in reducing onset of oral and anal sex (all students) and vaginal sex (Hispanic students).

**What impact has your innovation had to date? Exactly who are the beneficiaries of your innovation?**

The 24 month follow-up data indicates the curriculum has a significant efficacy in reducing onset of oral and anal sex, and significantly reducing onset of vaginal sex in Hispanic students. IYG also positively impacts psychosocial mediators including intentions (lifetime/current vaginal/oral/anal sex, condom use), beliefs, perceived norms, knowledge, self-efficacy, reasons to/not to have sex, and exposure to risky situations (all p<0.05).

**How many people have you served directly?**

In pilot testing and field testing over 500 middle school students have been exposed to the curriculum. Broader dissemination (described above) is pending the results of this and further field testing.

**How many people have you served indirectly?**

As above.

**Please list any other measures reflective of the impact of your innovation**

Short-term outcomes improved attitudes toward the use of computers in education (p<0.05), improved ratings of the importance of the program content in each lesson including the importance of ‘good’ friendships, understanding reproduction, consequences of sex (HIV/STDs/pregnancy), and protective behaviors. Usability parameters (ease, understandability, acceptability, credibility, likeability) all rate high with users.

## Sustainability

**How is your initiative financed?**

Funding was provided by the National Institutes of Mental Health, NIH. Award # NIMH R01 MH66640.

**Provide information on your finances and organization: annual budget, annual revenue, number of staff:**

Development, implementation, and evaluation of IYG have been conducted under the auspices of an R01 grant mechanism.

**What is the potential demand for your innovation?**

The effectiveness of the program is still being determined to indicate target populations most likely to benefit. Analysis to date indicates that the program holds promise in the prevention of the onset of some or all sexual behavior and impact of attitudes for most middle school students.

**What are the main barriers to financial sustainability?**

Grant funds were provided for development and efficacy testing. More funds are required for modification of the program for dissemination.

## The Story

**What is the origin of this innovation? Tell us your story.**

This work is born from the needs of our community to effectively address the challenges of HIV/STDs and pregnancy in our youth. The work stems from previous studies by Dr. Susan Tortolero, Director of the Center for Health Promotion and Prevention Research at the University of Texas and Principle Investigator on "It's Your game" (IYG) Project, and by Dr. Christine Markham, Deputy Director of the Center for Health Promotion and Prevention Research and co-Principal Investigator on the IYG project. The development and evaluation team also includes Dr. Ross Shegog whose research focus is on innovative applications of technology for health education and disease prevention, and Dr. Melissa Peskin whose research focus is on evaluation and dissemination of health education programs. "It's Your Game" represents the confluence of experience in sexuality research, health education program design, and the continued pursuit of effective and innovative public health applications.

**Please provide a personal bio. Note this may be used in Changemakers marketing material**

For more information on Drs. Susan Tortolero, Christine Markham, Ross Shegog, and Melissa Peskin please visit the University of Texas School.
For more information on Drs. Susan Tortolero, Christine Markham, Ross Shegog, and Melissa Peskin please visit the University of Texas School of Public Health website at http://www.sph.uth.tmc.edu/

How did you hear about this contest and what is your main incentive to participate? (this is confidential)

E-mail through Games-for-Health.

Source URL: https://www.changemakers.com/competition/healthgames/entries/its-your-game-keep-it-real#comment-0