

Project ID	HS-1
Title of Program	“Not MeToo!” Collaborative Consent and Active Bystander Training
Program Category	
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FLSA Designation	Non-exempt
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2018 LGFCU Excellence in Innovation Award Project Evaluation

Description of Productivity Improvement

The Smart Girls Leadership Academy (SGLA) is a group of young women who want to be leaders who mentor their peers, advocate healthy decision making, and educate the community about issues impacting the health of young people across Guilford County. The group is for young women in middle or high school who have completed Smart Girls Life Skills Training (teen pregnancy prevention program) and who are interested in taking what they have learned and becoming leaders who educate others!

SGLA meets monthly on topics relevant to leadership and empowerment as well as issues impacting the health of young people, specifically young women. To educate and empower more teens around the issue of sexual consent and being an active bystander to help prevent sexual violence from occurring, the GCDHHS, Division of Public Health collaborated with Planned Parenthood of South Atlantic's Teen Connections youth group and sexual assault prevention educator with the University of North Carolina at Greensboro.

These sessions coincided with the Me Too movement (or "#MeToo"), which spread virally in October 2017 as a hashtag used on social media to help demonstrate the widespread prevalence of sexual assault and harassment. This provided a very timely opportunity to educate and empower participants of both SGLA and Teen Connections about the topics of sexual consent and sexual assault prevention. Two sessions were held. The first session focused on the definitions of sexual consent and sexual assault, with interactive activities to enable participants to recognize consent and behaviors related to sexual violence. The second session focused on what it means to be an active bystander and enabled participants to gain competencies in challenging situations. An "Active Bystander" means taking responsible action to help people in need rather than remaining passive and becoming complicit. It does not mean aggression against the harm doer. Participants practiced using different strategies for intervening in potentially aggressive situations through role play. The following examples of strategies participants practiced included: Recruiting allies, using distraction, speaking up, empowering the target and asking an authority figure for help.

Description of why this project was initiated

According to the Substance Abuse Mental Health Services Association (SAMHSA), adverse childhood experiences (ACEs) are stressful or traumatic events that are common, often cluster together and have a dose response relationship with a multitude of costly health concerns. ACEs include: Physical, sexual and emotional abuse, physical and emotional neglect, intimate partner violence, mother treated violently, substance misuse within household, household mental illness, parental separation or divorce or an incarcerated household member. ACEs are strongly related to the development and prevalence of a wide range of health problems throughout a person's life. These health concerns, such as heart disease, liver disease, mental illness, obesity, alcoholism, drug addiction and early death have significant health and financial costs to the individual, family and society. (Source: www.samhsa.gov/capt/practicing-effective-prevention/prevention-behavioral-health/adverse-childhood-experiences).

According to the 2015 Youth Risk Behavior Surveillance System, it is estimated that one in three teens will be in an abusive relationship and 10.3% of high school teen girls reported being forced to have sex. (Source: <https://www.cdc.gov/mmwr/volumes/65/ss/ss6506a1.htm>). It is essential that teen girls recognize the warning signs of physical, verbal, emotional and sexual abuse. Teen girls must also understand consent and know how to avoid or safely remove themselves from unsafe situations. The two sessions we co-hosted with Teen Connections provided valuable information on these topics but also helps to address the culture of sexual violence by supporting active bystanders who look out for one another, changing cultural norms over time.

Quantifiable results (sustainability, cost savings, cost avoidance and/or a higher level of service).

Indication of what resources were used and what was done with any accrued time savings

Resources used for these sessions included in-kind support from two health educators with the Division of Public Health, in-kind support from one health educator from Planned Parenthood of South Atlantic and in-kind training support from the sexual assault prevention educator at UNCG. Refreshments were jointly provided by the Division of Public Health and Planned Parenthood using grant dollars. There was less planning time needed for both entities because of the collaboration. It is difficult to quantify specific cost savings; however, if the intervention decreases participants' risk that they may experience an ACE as a young person, they could, in turn have fewer subsequent health problems later in life, such as mental health issues, chronic diseases, or substance abuse as a result.

Based upon participant evaluations:

- 90% of participants are confident or very confident they will be able to express consent.
- 95% of participants would be able to recognize behaviors related to sexual violence.
- 95% of participants are confident that if they were put in a situation, they would not be a passive bystander.

Based on the positive collaborative experience with Teen Connections, SGLA plans to co-host sessions together on topics of mutual interest to the teens in 2018 as well. This educational format could be replicated in other communities with relative ease and minimal financial resources if in-kind training support is provided.

Other descriptive information

Not applicable.