



Adolescent Pregnancy Prevention: How Cultural Components Play a Role in Programs Tailored for Minority Youth

## Journal of Health Disparities Research and Practice

---

Volume 16 | Issue 1

Article 6

---

© Center for Health Disparities Research, School of Public Health, University of Nevada, Las Vegas

2023

### Adolescent Pregnancy Prevention: How Cultural Components Play a Role in Programs Tailored for Minority Youth

Sarah B. Maness , *College of Charleston*, manesssb@cofc.edu

Shristi Bhocchibhoya , *Georgia State University*, Shristib12@gmail.com

Marshall Cheney , *University of Oklahoma*, marshall@ou.edu

Follow this and additional works at: <https://digitalscholarship.unlv.edu/jhdrp>



Part of the [Public Health Education and Promotion Commons](#)

---

#### Recommended Citation

Maness, Sarah B.; Bhocchibhoya, Shristi; and Cheney, Marshall (2023) "Adolescent Pregnancy Prevention: How Cultural Components Play a Role in Programs Tailored for Minority Youth," *Journal of Health Disparities Research and Practice*: Vol. 16: Iss. 1, Article 6.

Available at: <https://digitalscholarship.unlv.edu/jhdrp/vol16/iss1/6>

This Article is protected by copyright and/or related rights. It has been brought to you by Digital Scholarship@UNLV with permission from the rights-holder(s). You are free to use this Article in any way that is permitted by the copyright and related rights legislation that applies to your use. For other uses you need to obtain permission from the rights-holder(s) directly, unless additional rights are indicated by a Creative Commons license in the record and/or on the work itself.

This Article has been accepted for inclusion in Journal of Health Disparities Research and Practice by an authorized administrator of Digital Scholarship@UNLV. For more information, please contact [digitalscholarship@unlv.edu](mailto:digitalscholarship@unlv.edu).

---

## Adolescent Pregnancy Prevention: How Cultural Components Play a Role in Programs Tailored for Minority Youth

### Abstract

**Introduction:** Cultural tailoring of adolescent pregnancy prevention programs has been utilized as a way to reduce persisting racial and ethnic disparities. This study explored how cultural components are included in evidence-based adolescent pregnancy prevention programs.

**Methods:** This study qualitatively assessed curricula of six federally supported evidence-based adolescent pregnancy prevention programs specifically tailored for African American and/or Hispanic youth. Patterns were analyzed within and between programs by two independent coders.

**Results:** Cultural components fell into five major themes: cultural art forms, traditions, history, community, and language. The most commonly included area was traditions (i.e. values, pride).

**Conclusions:** Variations exist in the cultural components both within and between adolescent pregnancy prevention programs in topics and depth of instruction. While curricula are often proprietary, transparency is recommended in future program development processes of cultural tailoring.

### Keywords

Adolescent pregnancy; Pregnancy prevention; Minority Health; Cultural Tailoring; Adolescent Health



**Journal of Health Disparities Research and Practice**  
**Volume 16, Issue 1, Spring 2023, pp. 82-93**  
© School of Nursing  
University of Nevada, Las Vegas

## **Adolescent Pregnancy Prevention: How Cultural Components Play a Role in Programs Tailored for Minority Youth**

Sarah B. Maness, College of Charleston

*Corresponding Author:* Sarah B. Maness, manesssb@cofc.edu

### **ABSTRACT**

**Introduction:** Cultural tailoring of adolescent pregnancy prevention programs has been utilized as a way to reduce persisting racial and ethnic disparities. This study explored how cultural components are included in evidence-based adolescent pregnancy prevention programs.

**Methods:** This study qualitatively assessed curricula of six federally supported evidence-based adolescent pregnancy prevention programs specifically tailored for African American and/or Hispanic youth. Patterns were analyzed within and between programs by two independent coders.

**Results:** Cultural components fell into five major themes: cultural art forms, traditions, history, community, and language. The most commonly included area was traditions (i.e. values, pride).

**Conclusions:** Variations exist in the cultural components both within and between adolescent pregnancy prevention programs in topics and depth of instruction. While curricula are often proprietary, transparency is recommended in future program development processes of cultural tailoring.

**Keywords:** Adolescent pregnancy; Pregnancy prevention; Minority Health; Cultural Tailoring; Adolescent Health

### **INTRODUCTION**

Adolescent pregnancy is in historic decline, but racial and ethnic minority groups remain disproportionately affected (Osterman et al., 2022). Adolescent pregnancy is a public health problem due to its association with adverse economic, social, and clinical outcomes. Teenage mothers are less likely to finish high school and are at increased risk for pregnancy-related anemia, preterm births, infants with low birth weight, and death in infancy (Ely & Driscoll, 2021; Kawakita et al., 2016). In 2019, birth rates among Hispanic and non-Hispanic Black adolescents in the United States were over two times higher than non-Hispanic white youth (CDC, 2021). One way

to reduce this inequity has been the development of adolescent pregnancy prevention programs tailored for minority youth.

In 2010, federal funds were allocated to support evidence-based adolescent pregnancy programs leading to the development of the Office of Adolescent Health (OAH) and the Teen Pregnancy Prevention Program (TPP) (Kappeler et al., 2014). It should be noted that in OAH merged with the Office of Population Affairs and the programs discussed in this study are from the OAH-based program (OASH, 2020). In 2010, in order to provide the \$75 million in funding for programs to replicate teenage pregnancy prevention programs, a list of eligible evidence-based programs was created. An initial list of 28 programs was created, which expanded over the years to 48 as of 2022 (youth.gov, 2022). Of these programs, a number were culturally tailored for use with racial and ethnic minority youth.

Cultural tailoring is a process utilized by health promotion practitioners working with ethnic/cultural groups to first identify cultural beliefs and norms that are important influences on group members' health related decisions and behaviors (Kreuter et al., 2003) and then to incorporate them into the development of preventive health promotion programs (Resnicow et al., 2000). The presence or absence of these values should be taken into consideration while planning and implementing prevention programs related to health-risk behaviors.

The process of cultural tailoring also includes language translation and use of symbols and logos to represent their concepts (Kreuter et al., 2003). Focusing on the culture of different cultural groups while formulating programs are expected to be fairly effective in improving outcomes (McCallum et al., 2017) thus reducing health disparities to achieve health equity—one of the goals of the Healthy People 2020 (Kreuter et al., 2003).

Although cultural tailoring is widely recognized and used in healthcare and public health, how “culture” is defined, operationalized, and integrated within programs is inconsistent. A limitation to the application of cultural tailoring is that researchers' descriptions of cultural components, including varying definitions of cultural sensitivity, cultural humility, cultural competence, and cultural awareness, do not indicate clear and consistent practical guidelines of how they are operationalized and implemented within the program structure (Damashek et al., 2011; Perry, 2022; Tervalon et al., 1998). The literature has shown that historically researchers have differed in ways of incorporating culture into research and practice including the use of community health workers, tailored intervention materials, and training in cultural competence (Barrera et al., 2013; Damashek et al., 2011; Joseph et al., 2015; Prezio et al., 2013).

A 2012 systematic review that specifically focused on past adolescent pregnancy prevention programs for minority youth identified that many of the programs included a cultural component, but each varied in method and intensity (Maness & Buhi, 2012). Furthermore, the application of cultural components varied, including having staff of the same ethnic group as the youth, ensuring availability of materials in target population's preferred languages, or targeting specific issues dealing with racial/ethnic identity (e.g., music, experience with racism, cultural values). However, this systematic review included only published studies and was not able to assess the full curriculum of each program to see exactly how cultural components were developed and implemented. This study seeks to explore to what cultural components are contained within culturally tailored curricula.

### Purpose

The current study uses content analysis of six culturally-tailored curricula to examine how cultural components are defined and integrated into evidence-based adolescent pregnancy prevention programs.

## METHODS

This study included a qualitative content analysis of 6 OAH evidence-based adolescent pregnancy prevention programs. At the time this study was conducted, there were 43 evidence-based models, 8 of which were specifically tailored for African American and/or Latino youth (OAH, 2019). The information used for this study was based on OAH information prior to the office merging with the Office of Population Affairs (OPA) (OASH, 2020).

Curricula were obtained from program developers using internal funding from the University of Oklahoma. Selected programs were those among the 43 OAH evidence-based models that were specifically designed for use with minority youth (n=8), however due to usage constraints (i.e. not being able to purchase the curriculum without cost prohibitive facilitator training) only 6 of the 8 OAH approved, culturally tailored programs were able to be obtained and analyzed. These programs included SiHLE, Aban Aya, HORIZONS, Sisters saving Sisters, ¡Cuidate!, and Project Image (DiClemente et al., 2016; Flay et al., n.d.; DiClemente, n.d.; Jemmott et al., n.d.; Villaruel et al., n.d.; Champion, n.d.; OAH, 2019). It should be noted that four of the six programs were developed for use with females only (SiHLE, Sisters saving Sisters, Project Image, HORIZONS). Five out of six curriculums used English language exclusively while ¡Cuidate! used both English and Spanish languages.

A codebook was developed by two investigators based on a review of the literature and a preliminary reading of the curriculum. Thirty-nine codes were developed based on commonly-used cultural components and additional areas of interest identified during the coding process. Codes were created to reflect the racial or ethnic group for which the tailoring was done (Table 2). The codebook was then to qualitatively code the written curriculum of each adolescent pregnancy prevention program. All content was independently coded by two coders (SM, SB). Team members coded each curriculum by hand using printed copies of curriculum and writing/highlighting directly on the curriculum where a cultural component was indicated. For example, if an activity or a poem was related to culture, this entire portion of the text would be highlighted, and a note would be written next to the highlighted text identifying the code. Coders met repeatedly during the initial phases of coding to discuss any discrepancies in coding. Codes were grouped into five main categories, cultural art forms, tradition, history, community, and language based on most common responses. Themes were identified in each category and must have been included in at least 2 programs to be considered a theme. This study determined exempt by the University of Oklahoma Institutional Review Board.

**Table 1.** Description of culturally tailored adolescent pregnancy prevention programs included in content analysis

Curriculum	Setting	Target Outcome Measures	Target Pop.*	Sex**	Age	# of sessions	Session length	OAH Study Rating
SIHLE	After school or	Contraceptive use, consistency, pregnancy, birth	AA	F	14-17, 18-19	4	4 hours	High

85 Adolescent Pregnancy Prevention  
Maness

	community-based							
Aban Aya	After school or community-based; Middle school	Recent sexual activity	AA	All	13 or under	15	45 min	Moderate
Sisters saving Sisters	After school or community-based; health clinic	Number of sexual partners, condom use and consistency, sexually transmitted infections (STIS), HIV	AA & H	F	12-18	5	1 hour	High
HORIZONS	After school or community-based; health clinic	Contraceptive use and consistency, STIS, HIV	AA	All	15-21	2	4 hours	High
¡Cuidate!	After school or community-based; High school/ Middle school	Recent sexual activity, number of sexual partners, contraceptive use and consistency	H	All	13-18	6	1 hour	High
Project Image	Health clinic	STIs, HIV	AA & H	F	12-18	7	1-4 hours	Moderate

\*Target population AA: African American, H: Hispanic

\*\*Sex: F: Female, M: Male, All: No sex specified

Note: Information gathered from individual program curricula and Office of Adolescent Health <https://www.hhs.gov/ash/oah/grant-programs/teen-pregnancy-prevention-program-tpp/evidence-based-programs/index.html>

Table 2 Summary of Cultural Tailoring Components by Program

<b>Cultural Component</b>	<b>Program SIHLE</b>	<b>Program HORIZONS</b>	<b>Program Project Image</b>	<b>Program ABAN AYA</b>	<b>Program Sister Saving Sisters</b>	<b>Program Cuidate</b>
<b>Cultural Art forms</b>	Use of poems, heritages, ethnic prints and picture; Images of AA boys and girls in their ethnic attire.	Popular AA songs and music, Images of black couple.	Not explicitly included	Use of map of Africa, African storytelling, quotes poetry and music, proverbs, symbols, and quotes.	Not explicitly included	Use of symbols, logos, popular quotes and Latin music.
<b>Tradition</b>	Characteristics of each gender and their roles, their pride associated with their inner and outer beauty.	Beauty associated with being AA, religions and ethnic values, pride related to rich culture and heritage, collectiveness, characteristics of young black women	Discussion about AA and Mexican culture and values, prevalent gender roles of their community.	Description of African American pride, culture and values, role of church and family support.	Not explicitly included	Latin family values (like respecto, familismo), culture, pride, and gender roles (machismo, marianismo).
<b>History</b>	Discussion about their origin, ancestors; role of role model in uplifting their race; issues of racism.	Contribution of AA leaders against racism and inequality,	Not explicitly included	Described their origin-land of Africa, stereotypes and racisms related to AA, Rise of African American colleges and universities.	Not explicitly included	Identifying their origin, stereotyping Latino character in media.
<b>Community</b>	Portraying African American figures as	African American role models and their	Health facts related to their ethnic groups.	Unity and values in their African community,	Health facts related to African	Health Facts related to

	role models; uniquely representing AA women as one entity.	contributions, sense of belongingness.		“We” vs “I”, African American role models and their achievements.	American and Latino community.	Latino groups.
<b>Language</b>	Use of popular AA names, Use of colloquial expressions.	Colloquial expressions.	Use of Latin names; Spanish terminologies.	Terminologies that have African origin, Swahili terms, African American names, African American slangs.	Latin names and African American names.	Spanish terms, Latin names.

## Results

Overall, of the six programs included, three were tailored specifically for African American youth (SiHLE, HORIZONS, Aban Aya), one for Hispanic youth (¡Cuidate!) and two tailored for both African American and Hispanic cultures (Project Image, Sisters saving Sisters). Cultural components are described in five major categories, including cultural art forms (poetry, art, images, music, quotes, oral tradition), traditions (values, pride, gender roles, collectivism, cultural sensitivity, spirituality), history (historical knowledge, racism, geography), community (role models, concept of sisterhood) and language (spoken language, colloquialisms, names). All quotes are from written curricula unless otherwise stated.

### Content Area 1: Cultural Art Forms

The area of cultural art forms includes cultural components such as poetry, art, images, music, quotes and oral tradition and were explicitly found within the programs of Aban Aya, HORIZONS, and SiHLE.

*Each lesson begins with an African proverb or African-American quote that is related to the main point of the lesson. In addition, classroom curriculum exposes students to African-American literature, history, (including the history of African-American before slavery, poetry, art, and music). Students also are exposed to the African Oral tradition and art of storytelling.*

-Aban Aya

Poetry was included in three programs tailored for African American youth (SiHLE, HORIZONS, Aban Aya). Poetry is used as a tool to enhance self-confidence and pride among African American women, including language about shades of beauty, place in history and unique appearances. Poetry is also used as a medium to combat racial prejudice. Poems were included as readings in the curriculum for students and were either written by African American authors or contained subject matter related to black history. Activities also included copying poems into



journals for further reflection (HORIZONS). Aban Aya included quotes and a description of the African tradition of oral storytelling in addition to poetry.

*Today's poem, Call Me Black Woman, helped me understand how connected we are, even if we have different colored skin, wear our hair differently, and speak different languages.*  
- SIHLE

Other forms of art include descriptions of Black art, including prints, notecards, fabrics, magazines, music, and paintings (SiHLE). ¡Cuidate! describes how the entire logo and color scheme of the curriculum was chosen to stand for the meaning of the program. For example, the sun at the center represents an important symbol of life in many Latino cultures. Other curricula containing images in the programming, show images of individuals who reflect the racial and ethnic background for which the program has been tailored (SiHLE, HORIZONS, Aban Aya).

*In the logo, the sun at the center symbolizes the importance of sustaining life. The sun is a symbol important to many Latino cultures. Just as the sun sustains life on earth, this program will help you sustain healthier lives. Because of its round shape, the sun also symbolizes the wholeness and unity of Latino families and communities.* - ¡Cuidate!

In addition to visual art, music also played a role in the cultural components included in programs. Programs included either lyrics of music in the text or actual music included as CDs (HORIZONS, Aban Aya, ¡Cuidate!). This music included supporting positive rap songs in curriculum for African American youth. ¡Cuidate! included a song in Spanish that described a man infected with HIV and his choices. Students listened to the song and had a follow up discussion about sexual risk taking.

#### Content Area II: Traditions

Cultural traditions include components that describe cultural values including navigating concepts of traditional gender roles, pride, and celebrations. Five programs explicitly discussed cultural values (SIHLE, HORIZONS, ABAN AYA, ¡Cuidate!, Project Image). Using posters and pictures to describe the values was common in most of the curricula. HORIZONS specifically includes an activity that asks participants to talk about characteristics of a strong Black woman and thinking about things that participants personally value.

*We learned through these activities that it is very important for us as young black women to value our culture and ourselves.*  
-HORIZONS

One program that identified Latino cultural values was ¡Cuidate!, which includes activity and discussion about the values of respeto, familismo, fatalism, machismo, and marianismo. Particularly in ¡Cuidate! and Project Image, the curriculum states that Latino culture does not interfere with using condoms and frames the idea of machismo from the perspective that men are also considered macho when they use condoms and protect their partners. These values are linked to sexual activity and making decisions to keep oneself safe from pregnancy and sexually transmitted infections.

*While values are not strict rules, they do influence how and why we make certain decisions. They also influence how we behave and how we care for ourselves and others. The specific Latino cultural values that we talked about today: familismo, respeto, machismo, marianismo and fatalism may guide us in how we think and what we do in sexual situations, as well as how we think about protecting ourselves from pregnancy and STDs, including HIV. We'll talk about this more throughout the program.* -¡Cuidate!

The Aban Aya curriculum gives background information on how the curriculum was tailored, specifically through focus groups that indicated a need to reinforce cultural values.

*ABAN AYA teaches students traditional African- American values, including the strong role of church and family support networks as well as the African principles of unity, self-determination, collective community responsibility, cooperation, purpose, creativity and faith.*  
-Aban Aya

Cultural pride was a component included in four programs (SiHle, HORIZONS, Aban Aya, ¡Cuidate!). Descriptions of pride included being proud of one's racial or ethnic identity based on accomplishments, history, collectivism, or beauty. Both SiHle and HORIZONS curricula include some of the same statements about pride.

*It also introduces the idea that being a proud Latina/o means protecting oneself and behaving responsibly.*  
- ¡Cuidate!

One way in which cultural pride was manifested in several of the programs target towards adolescent females was through physical characteristics and beauty (SiHle, HORIZONS).

*HORIZONS sistas are special because...They possess a sense of inner and outer beauty.*  
-HORIZONS

### Content Area III: Community

Programs mentioning concepts of community in relation to culture included the ideas of cultural role models (SIHLE, HORIZONS, ABAN AYA) and the concept of sisterhood (HORIZONS, SIHLE). These concepts were predominant in programs tailored for African American youth.

*In many African cultures, a "community" is thought of as more than just an area or neighborhood where people work and live together. It is a place where people have in common similar values and goals and they work together to help each other.* -Aban Aya

The idea of sisterhood promotes togetherness and establishes the notion that females are special, beautiful, motivated, empowered, and strong. This concept was included in both programs developed specifically for African American female youth (HORIZONS, SIHLE).

*Sometimes it takes being in a Room Full of Sistas like ours to recognize our strengths and weaknesses. Being in a room with other beautiful, intelligent and strong women allows you to reflect on those same characteristics within yourself.* -HORIZONS

Role models are emphasized in three programs developed for African American Youth (SiHLE, HORIZONS, Aban Aya). Role models include both those that youth may know, as well as exposing them to the biographies of famous or well-accomplished African Americans along with their goals, struggles, and life lessons.

*Now that I've heard about a few strong Black women in our society, I realize there are strong Black women who are role models in my life.*  
-SiHLE

### Content Area IV: History

Cultural components related to history include racial and ethnic historical knowledge, the concept of racism, as well as geography related to cultural ancestry. This includes descriptions of ancestors, their strengths, rich roots and accomplishments. SiHLE and HORIZONS include brief biographies of revered African American poets, leaders, athletes, and actors, while Aban Aya gives a brief history of each of the first Historically Black colleges and universities in the United States.

*African American colleges and universities were formed at a time when African Americans were often not allowed to attend all white schools. As an expression of self-*

*determination, African Americans created their own schools to give all African Americans a place where they could build skills, learn to become economically self-supporting and share their cultural knowledge/experiences.* -Aban Aya

Stereotypes and racial prejudice are specifically discussed in SiHle, Aban Aya, and ¡Cuidate!. Participants in Aban Aya undertake an activity to list stereotypes they have and believe others have about the African American community and then reflect on the feelings associated with these stereotypes. Ideas behind stereotypes are discussed and explained to allow students to better understand their origins and falsehoods.

*Highlight that although stereotypes about African Americans people and their community exist, it is important not to “buy in” to what they are. Reiterate the importance of feeling confident about your culture, your goals, and your ability to make good decisions. For if someone should try to place stereotypes on you, you can say they aren’t true and believe it.* -Aban Aya

SiHle and Aban Aya focus on Africa and contain the inclusion of terms and symbols from African cultures including Swahili and from the Akan culture originating in Ghana (Aban Aya). They also describe the meaning of quotes originating in African countries. The name SiHLE itself, originates from a female name from the southern region of Africa that means “beautiful”. Aban Aya also includes a lesson where a map of Africa is displayed.

*Africa is made up of over 50 countries; Africa is a land of great wealth; we are descendants of African Queens and Kings; many of our world-famous inventions were created by Africans and African Americans.* -Aban Aya

¡Cuidate! also gives participants the opportunity for activities that describe the countries and languages of people of Hispanic origin.

*I am \_\_\_\_\_ ( E.g. Puerto Rican, Columbian, Peruvian, etc.)* - ¡Cuidate!

#### Content Area: V: Language

The cultural component of language extends to spoken and written language, colloquialisms, and cultural history of given names. The only cultural component which all 6 programs included was traditionally African American or Hispanic names represented in the curriculum. Also common was use of Spanish (¡Cuidate!, Project Image) or African languages (SIHLE, ABAN AYA,)

*Msogeo Nguvu (Powerful Movement) The exercise Msogeo Nguvu is a series of slow continuous moves. Msogeo Nguvu is African for Powerful Movement.* -SIHLE

In addition, colloquialisms were often used to facilitate a group identity among participants (SIHLE, HORIZONS).

*You are a beautiful HORIZONS sista and I have faith in you. Don’t forget that HORIZONS sistas are proud of who they are and what they stand for. Girl, we’ve got it going on!! You are a strong sista who represents black pride and shows respect for herself, as well as others. You are a reflection of the new beginnings that await your spirit.*

-HORIZONS

## **DISCUSSION**

Overall, this study found a wide range of cultural components exist among programs studied, however identified cultural components vary both across and within programs in terms of depth and length of content in each category of cultural art forms, tradition, history, community,

and language. The wide variation in cultural components may be specific to areas of the country and populations with which the curriculum was developed, however, this information is often not published. These findings were consistent with previous literature indicating that cultural tailoring do not have clear and consistent operationalization (Damashek et al, 2011; Perry, 2022). Programs were broadly stated to be tailored for African American or Hispanic youth. It is important to note that in addition to race/ethnicity, regional-based culture and culture based on country of origin can vary greatly as African American and/or Hispanic race/ethnicity is broad and heterogenous.

The qualitative analysis in this project coded cultural components that were overtly included in program materials. In this way, we were able to capture many of the defined processes of cultural tailoring such as language translation, use of symbols and logos (Kreuter et al., 2003). However, the materials themselves often do not contain information how exactly an intervention was tailored. The information about how programs were developed would be useful to be included in the curricula facilitator training manuals. Another aspect to consider is that the majority of programs were developed over a decade ago and it is not clear often cultural components within programs should be updated to maintain relevance for changing trends among adolescent populations. This was also discussed in an interview linked to the OAH website for SiHLE with program developer Dr. Ralph DiClemente (OAH, 2015). Dr. DiClemente acknowledged that aspects such as videos, roleplays and music, have a shelf life and must be able to be continually updated to stay contemporary. Past research has indicated that cultural tailoring can be effective in improving outcomes, yet it is not clear that these programs have been evaluated specifically based on cultural components (McCallum et al., 2017). Future evaluations should measure cultural relevance that takes into account changes over time. Another way to improve relevance of programs is to involve the community in their creation, using Community Based Participatory Research (CBPR). CBPR is a method that gives equity in decision-making and involvement in the research process between community members and researchers that has shown promise in reducing health inequities in the United States (Duran et al., 2019).

This study is not without limitations. Researchers were only able to access 6 of the 8 Office of Adolescent Health approved culturally tailored, evidence-based adolescent pregnancy programs. Due to proprietary issues, the remaining two programs were unable to be purchased for review without also obtaining cost prohibitive facilitator training. This research was a review of published curricula which did not include detailed information of how the programs were developed. As these are proprietary programs, that information is not publicly available. It would have been helpful to have information on how the programs were developed and future research could include interviewing program developers on tools and methods they used to include the cultural components of the programs. In addition, the qualitative methodology used to explore this content does not capture program evaluation, including both fidelity to curriculum and program outcomes.

In conclusion, the culturally tailored adolescent pregnancy prevention programs that were assessed included a wide range of cultural components. The most commonly included area was traditions (i.e. values, pride). Future research should assess specifically how these programs were developed (i.e. focus groups, specific focus on regions of country, etc.) and rigorously evaluate how cultural tailoring plays a role in program outcomes.

#### Implications for Practice

While curricula are often proprietary, transparency in program development processes of cultural tailoring is recommended. This transparency can also assist in linking cultural components to program outcomes. All curricula reviewed in the present study are evidence-based, however, little information is published regarding how cultural components affect program outcomes. In addition, it would be helpful to add information about cultural tailoring to the evidence-based pregnancy prevention program details that are collected and published by the Office of Adolescent Health online. Gathering this information and specifics on activities and modifications that are a part of cultural tailoring will build the ability to measure culturally tailored components of programs and include these aspects in program evaluation to see how and to what extent they impact program outcomes.

## REFERENCES

- Barrera Jr, M., Castro, F. G., Strycker, L. A., & Toobert, D. J. (2013). Cultural adaptations of behavioral health interventions: a progress report. *Journal of consulting and clinical psychology, 81*(2), 196.
- Centers for Disease Control and Prevention. (2021). Teen pregnancy in the United States <https://www.cdc.gov/teenpregnancy/about/index.htm>
- Champion, J. D. (n.d.) Project Image. ETR. Program Success Center for Sexual and Reproductive Health. <https://www.etr.org/ebi/programs/project-image/>
- Damashek, A., Bard, D., Hecht, D. (2011). Provider Cultural Competency, Client satisfaction, and engagement in home-based programs to treat child abuse and neglect. *Child Maltreatment 17*(56), 55-56. doi: 10.1177/1077559511423570
- DiClemente, R., Wingood, G., Harrington, K., Lang, D., ... & Robillard, A. (2016). SiHLE: Health workshops for young Black women. Sociometrics. <https://www.socio.com/products/pasha-sihle-health-workshops-for-young-black-women>
- DiClemente, R. J., Wingood, G. M., Rose, E. S., Sales, J. M., ... & Crosby, R. (n.d.). HORIZONS. Sociometrics. <https://tppevidencereview.aspe.hhs.gov/document.aspx?rid=3&sid=81&mid=1>
- Duran, B., Oetzel, J., Magarati, M., Parker, M., Zhou, C., Roubideaux, Y., ... & Wallerstein, N. (2019). Toward health equity: A national study of promising practices in community based participatory research. *Progress in community health partnerships: research, education, and action, 13*(4), 337-352.
- Flay, B., Graulich, S. (n.d.). Aban Aya Youth Project. Sociometrics. <https://tppevidencereview.aspe.hhs.gov/document.aspx?rid=3&sid=4&mid=1>
- Jemmott, L. S., Jemmott, J. B., McCaffree, K. A. (n.d.). Sisters Saving Sisters. ETR: Program Success Center for Sexual and Reproductive Health. <https://www.etr.org/ebi/programs/sisters-saving-sisters/>
- Joseph, R. P., Keller, C., Adams, M. A., & Ainsworth, B. E. (2015). Print versus a culturally relevant Facebook and text message delivered intervention to promote physical activity in African American women: a randomized pilot trial. *BMC women's health, 15*(1), 1-18.
- Kreuter, M. W., Lukwago, S. N., Bucholtz, D. C., Clark, E. M., & Sanders-Thompson, V. (2003). Achieving cultural appropriateness in health promotion programs: targeted and tailored approaches. *Health Education & Behavior, 30*(2), 133-146.

- Maness, S & Buhi, R. (2012). Pregnancy Prevention Programs for Minority Youth: A Systematic Review. *Public Health Reports* 131(1), 86-99.
- McCallum, G. B., Morris, P. S., Brown, N., & Chang, A. B. (2017). Culture-specific programs for children and adults from minority groups who have asthma. *Cochrane Database of Systematic Reviews*, (8).
- Office of Adolescent Health. U.S. Department of Health & Human Services. (2019). Evidence-based teenage pregnancy prevention programs. <https://www.hhs.gov/ash/oah/grant-programs/teen-pregnancy-prevention-program-tpp/evidence-based-programs/index.html>
- Office of Adolescent Health. U.S. Department of Health & Human Services. (2015). SiHLE <https://www.hhs.gov/ash/oah/grant-programs/teen-pregnancy-prevention-program-tpp/evidence-based-programs/sihle/index.html>
- Office of the Assistant Secretary for Health. (2020). Office of Population Affairs. <https://opa.hhs.gov/research-evaluation/opa-publications>
- Osterman, M. J. K., Hamilton, B. E., Martin, J. A., Driscoll, A. K., & Valenzuela, C. P. (2022). Births: Final Data for 2020. *National Vital Statistics Reports*, 70 (17). <https://www.cdc.gov/nchs/data/nvsr/nvsr70/nvsr70-17.pdf>
- Perry, K. E. (2022). The Thai-American duality: reflections on roots, cultural humility, and knowledge production in global health. *The Lancet Global Health*, 10(3), e445-e447.
- Prezio, E. A., Cheng, D., Balasubramanian, B. A., Shuval, K., Kendzor, D. E., & Culica, D. (2013). Community Diabetes Education (CoDE) for uninsured Mexican Americans: a randomized controlled trial of a culturally tailored diabetes education and management program led by a community health worker. *Diabetes research and clinical practice*, 100(1), 19-28.
- Resnicow, K., Soler, R., Braithwaite, R. L., Ahluwalia, J. S., & Butler, J. (2000). Cultural sensitivity in substance use prevention. *Journal of Community Psychology*, 28(3), 271-290.
- Villarruel, A. M., Jemmott, L. S., & Jemmott, J. B. (n.d.) ;Cuidate! ETR. Program Success Center for Sexual and Reproductive Health. <https://www.etr.org/ebi/programs/cuidate/>
- Youth.gov. (2022). HHS Teen pregnancy prevention evidence review on youth.gov. <https://tppevidencereview.youth.gov/EvidencePrograms.aspx>