## **Project AIM (Adult Identity Mentoring)**



### The Research

### The Science behind the Package

*Project AIM* is a group-level, positive youth development intervention designed to reduce pregnancy and sexually transmitted disease by promoting the motivation to make safe choices and to address deeper barriers to sexual risk prevention. The intervention is based on the Theory of Possible Selves, which states that a person's motivation is determined by a balance of positive and negative ways people see themselves in the future. Individuals who are able to imagine both possible positive and negative futures are more likely to work toward their life goals and achieve future success. Thus, *Project AIM* encourages at-risk youth to imagine a positive future and discuss how current risk behaviors can be a barrier to a successful adulthood.

# **Target Population**

Middle School Youth ages 11-14

#### Intervention

Project AIM is divided into four parts. Using group discussions and interactive activities, Part One encourages youth to explore their personal interests, social surrounding, and what they want to become as an adult. Youth also identify people in their lives who may be barriers or supporters to their successful adulthood. Young adults from the community who are on their road to success are invited to speak with youth in Part One. In Part Two of the intervention, youth envision themselves in a future career and connect current behavior with success as an adult through activities such as completing a career interest inventory, developing business cards and resumes, and participating in interviews. Part Three of the intervention engages youth in role-plays around communication and small group activities involving planning and decision-making. Part Four provides the opportunity for youth to think about their future in terms of milestones to accomplish goals and overcome potential obstacles they may encounter in life.

### **Research Results**

*Project AIM* was tested among African American 7<sup>th</sup> grade students in Birmingham, Alabama. At 12 weeks after the intervention youth participating in *Project AIM* compared with youth not receiving the intervention reported the following outcomes:

- Increased abstinence
- Decreased intention to engage in sex

Secondary analyses showed that *Project AIM* participants improved in academic outcomes and decreased in school suspensions compared to youth not receiving *Project AIM*.

## The Intervention: A Package Developed from Science

Replicating Effective Programs (REP) is a CDC-initiated project that identifies HIV/AIDS prevention interventions with demonstrated evidence of efficacy. Project AIM is one the REP interventions and is the product of extensive collaboration among researchers, educators, providers, community agencies, and youth. Project AIM has been field tested in two community-based settings, including a church setting, by non-research staff with African American and Latino youth. Project AIM has also been packaged as a school-based intervention.

### **Core Elements:**

Core elements are intervention components that must be maintained without alteration to ensure program effectiveness. *Project AIM* core elements include:

### **Content Core Elements**

- 1. Engage youth in thinking about a positive possible future self.
  - ✓ Look ahead to the future as successful adults.
  - ✓ Envision a positive future self.
  - ✓ Set goals and plans to achieve a positive future as an adult.
  - ✓ Articulate the specific details of a positive future self.
- 2. Engage youth in present actions to achieve future success. Develop skills to achieve effective communication. Identify their strengths and the resources needed for future success.
  - ✓ Experience success to reinforce youths' positive future selves.
- 3. Encourage youth to safeguard the future through risk reduction.
  - ✓ Develop strategies to safeguard the likelihood of a positive future self through risk reduction and a balance of their future possible positive and negative selves.

### **Implementation Core Elements**

- 4. Have youth create a compilation of their work representing their positive future possible future self and the activities to achieving that possible future self.
- 5. Use two skilled and trained facilitators whom youth find credible to deliver *Project AIM*.
- 6. Deliver multiple intervention sessions, with sufficient time between sessions for youth to process information, draw conclusions, and invest in their goals.

### **Pedagogical Core Element**

7. Deliver activities in ways that support youths with enthusiastic positive feedback that focuses on their individual strengths.

### **Key Characteristics:**

*Project AIM* has the following key characteristics:

- 1. The optimal group size is between 10-18 youth.
- 2. Facilitators should be young adults from backgrounds similar to youth and able to relate/interact positively with youth.
- 3. Session length is 50 minutes. However, sessions could be extended to accommodate for more in-depth discussions or supplemental activities.
- 4. Guest speakers share their experiences with working towards a positive future and the challenges they may have encountered; these presentations can be in-person, video, or other format.
- 5. *Project AIM* uses career software and the Internet to match youth interests to career possibilities.

### **Package Contents Available For Purchase:**

- Project AIM Implementation Manual including a Facilitator Handbook
- Posters and a USB with handouts
- Youth Workbook

### **Intervention Training:**

Program staff from agencies implementing *Project AIM* must attend a 3-day training in which they learn about the intervention objectives, why it works, and how to conduct the program in their setting. They also have the opportunity to practice intervention delivery skills, and identify agency-specific intervention strategies.

## For More Information on *Project AIM*:

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### For details on the Research Design:

Clark, L., Miller, K., Nagy, S., Avery, J., Roth, D., Liddon, N., et al. (2005). Adult identity mentoring: Reducing sexual risk for African-American seventh grade students. *Journal of Adolescent Health*, *37*, 337.e1–337.e10.