



OHIO PREP

2017-2018 EVALUATION

Prepared for:
The Ohio Department of Youth Services

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Acknowledgments

The Ohio Personal Responsibility Education Program (PREP), administered by the Ohio Department of Youth Services (ODYS), is part of a larger national initiative to decrease teen pregnancy rates and the spread of sexually transmitted infections among youth. The Ohio program, an external evaluation conducted by Ohio University's Voinovich School of Leadership and Public Affairs, and hence this report are funded through a federal grant. Evaluation team members from the Voinovich School include Margaret Hutzler, MPA, and Natalie Wilson, MPA, and Student Researchers Casey Machenheimer and Lilli Sher.

Most importantly, we offer our sincerest appreciation to the leadership team at ODYS, which includes Tecca Thompson and Kevin Shepard, the dedicated Regional Coordinators, Master Trainers, and the Facilitators who implement PREP with youth.

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Executive Summary

To reduce Ohio's teen pregnancy and sexually transmitted infection (STI) rates among youth residing in foster care and the juvenile justice systems, the Ohio Department of Youth Services (ODYS) administers the federally funded Personal Responsibility Education Program (PREP). Staff in a variety of agencies throughout the state are trained in evidence-based pregnancy prevention programming and sexual health education. With the goal of providing health education and healthy lifestyle choices to youth and young adults who are at high risk for early pregnancy and high rates of STIs, Ohio PREP includes pregnancy prevention, contraception, and STI and HIV prevention, as well as selected adulthood topics including healthy relationships, career and education planning, and financial literacy. The selected curriculum for the last several years is Reducing the Risk (RTR), an evidence-based comprehensive abstinence and contraceptive education program for at-risk youth.¹

ODYS contracted with Ohio University's Voinovich School of Leadership and Public Affairs to be the external evaluator. Ohio PREP and Voinovich School evaluators collected a variety of data to inform this evaluation. These data include youth entry and exit survey responses, youth attendance records, visits to four of Ohio's nine regional coordinating sites and two focus groups with Facilitators, as well as youth and agency staff opinions collected on surveys. This report addresses the past program year, which was October 1, 2017, through September 30, 2018. The youth data reflects cohorts that were completed during the same time period but may have started in the prior year.

Primary Evaluation Findings

✓ Over the past program year, **894** Ohio youth attended at least one PREP session, and the majority (76%) entered the program through the juvenile justice system.

“(The program taught me) to do well with saving money.”

✓ **564** youth completed 75% of the 15- to 16-hour PREP programming.

✓ Overall, Ohio youth engaged in PREP not only show increased knowledge of sexual health, prevention of pregnancy and STIs, but they also show improved intentions to use condoms and hormone-based birth control.

✓ ODYS is responsive to recommendations from Regional Coordinators, Program Facilitators and the External Evaluators and actively engages these parties for program improvements. ODYS selected an additional evidence-based STI and Pregnancy prevention program called

¹ U. S. Department of Health & Human Services, Office of Adolescent Health. (2015, December 11). *Reducing the Risk*. Retrieved from <https://www.hhs.gov/ash/oah/grant-programs/teen-pregnancy-prevention-program-tpp/evidence-based-programs/reducing-the-risk/index.html>

Making Proud Choices and is in the process of training Facilitators to implement the programming. This evidence-based program was selected in part because it is somewhat shorter, which may help with program completion rates.

- ✓ Among the Facilitators trained to provide the intervention, Ohio PREP is increasing knowledge of STIs/teen pregnancy prevention and knowledge of the rights of youth related to accessing reproductive health care.
- ✓ Ohio PREP has improved the average cohort length by reducing the prior average length of 49 days² to an average cohort length of 39 days. The ideal length is between 2 and 30 days.

The Population Served

The majority (72%) of Ohio PREP youth participants enter the program via the juvenile justice system; they are in juvenile detention centers or court-ordered treatment centers. Some are on probation or in diversion programs that are also court ordered. Youth report their gender and age upon program entry. If no data is available, gender and/or age recorded by instructors is used.

- 70.4% of youth served are male (564) and 29.6% are female (237).
- Most youth are black (50.5%) or white (49.2%). Nearly 8% are Hispanic.
- Youth range in age from 14 to 17. Average age is 16.15.
- 87.9% of youth self-identify as straight, 2.3% are gay or lesbian, 6.4% are bisexual, and 0.1% are transgender.

A very high percentage of Ohio PREP youth participants report they have had sexual intercourse, and a high percentage report multiple partners. Of all youth participants answering the question (665), 83.8% report having had sexual intercourse, described as “the act that makes babies.”

Figure 1. Nearly 84% of youth entering the PREP program have had sex.

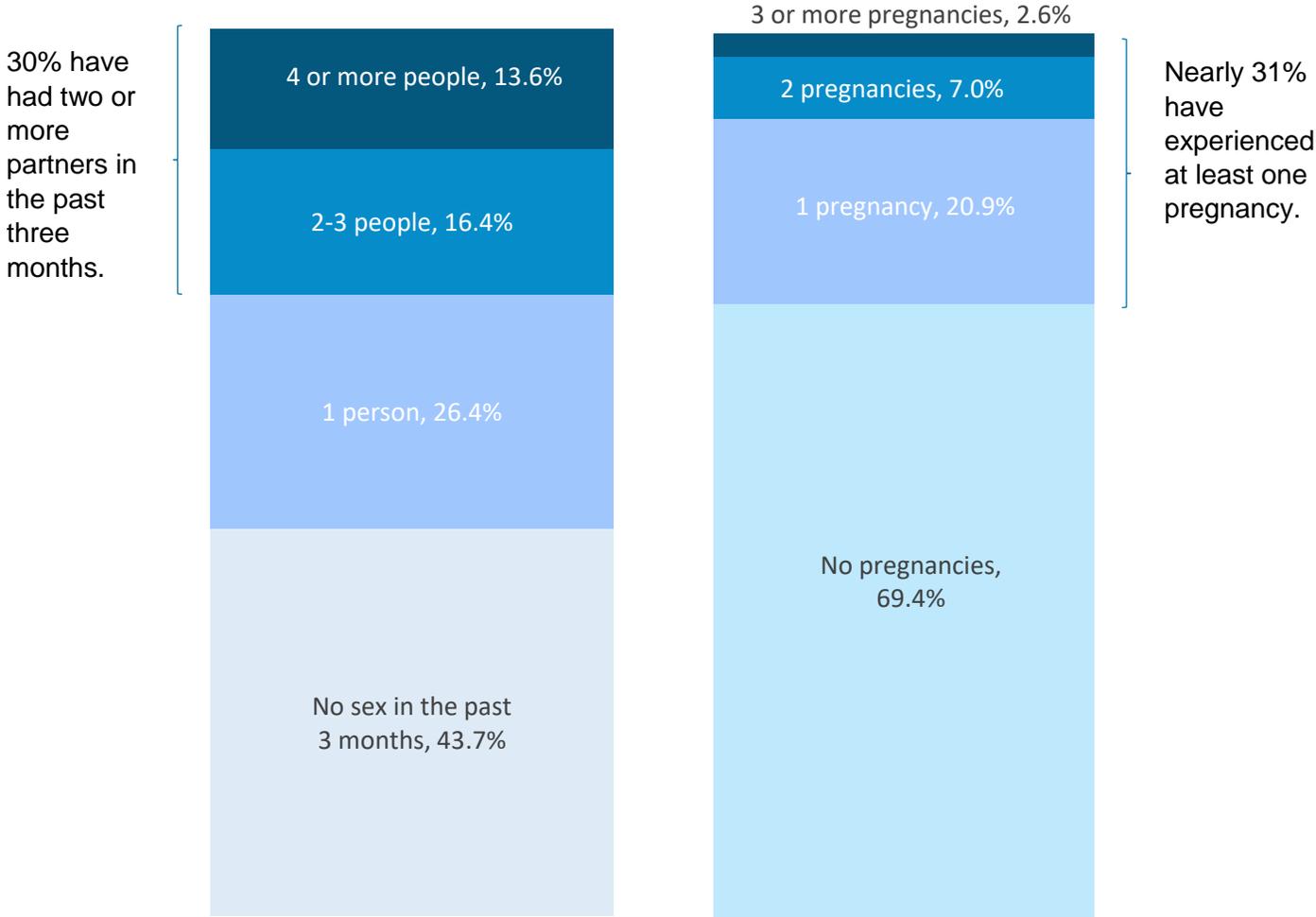


² Hutzel, M., Wilson, N. & Schoen, K. (2018) *Ohio PREP Evaluation*, Ohio University's Voinovich School of Leadership and Public Affairs. Athens, OH.

Evaluation Results

The following results focus on the 83.8% of youth who report they have had sex. The youth participants who report ever having sex are asked via survey, to the best of their knowledge, how many times they have been pregnant or gotten someone pregnant, to which 530 responded. Just over 30% responded either one or more prior pregnancies. Nearly a third (30%) report having had two or more partners in the past three months. Nearly 44% of youth who have had sex have not had sex in the past three months, and 26% have only had one partner.

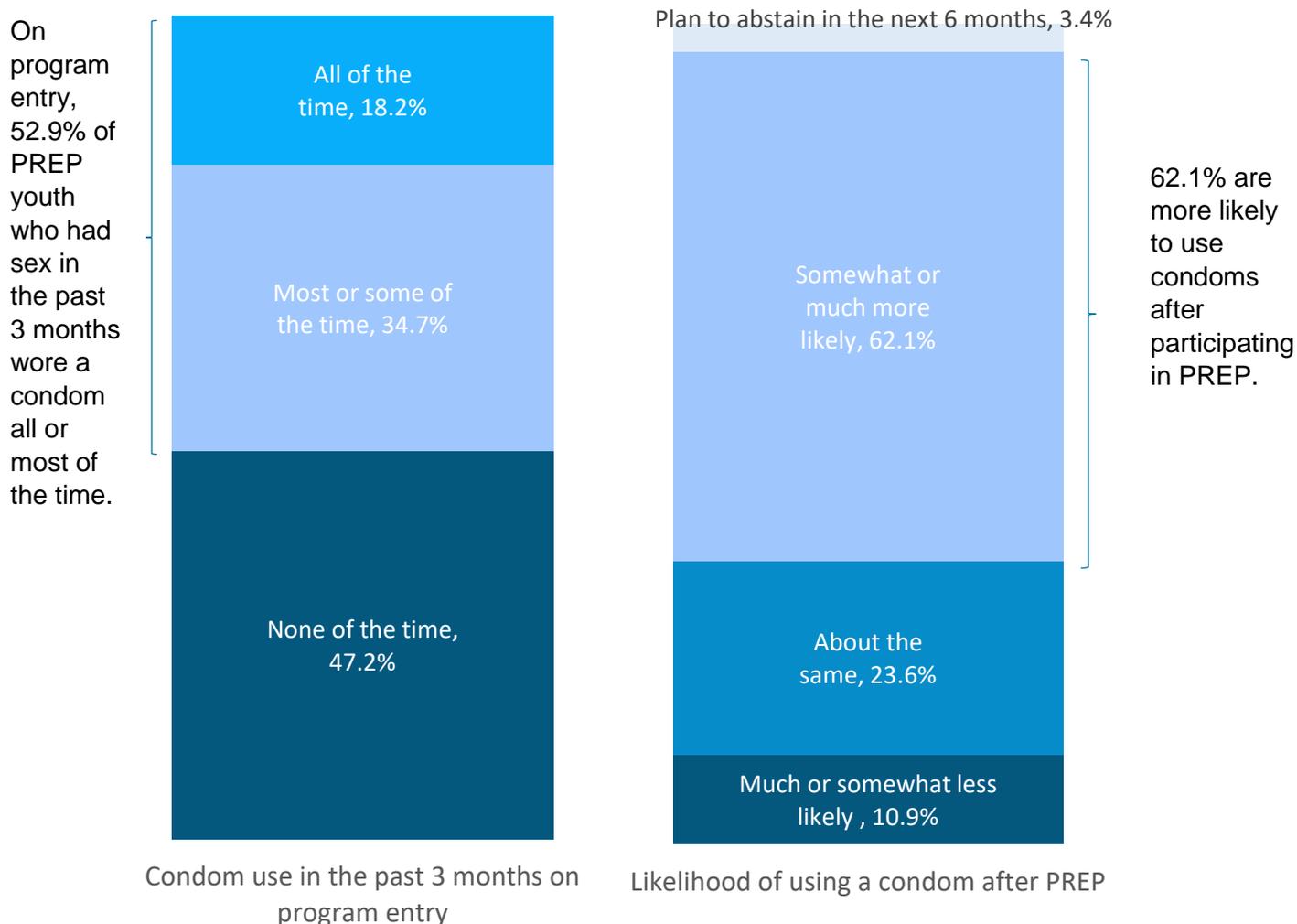
Figures 2 and 3: Number of partners and pregnancies among those PREP youth who have had sex.



Youth Intentions

A key component of the Reducing the Risk curriculum is teaching youth how to protect themselves and their partner from pregnancy or STI transmission. Youth participants are asked to respond to whether, given the chance, they *intend* to have sexual intercourse in the next six months. Sexual intercourse is defined as “the act that makes babies.” The following charts represent youth with matched entry and exit surveys who completed 75% of the program and reported having sex in the last three months (180 youth). Just over half of the youth used a condom at least some of the time before the program. After the program, 62% are at least somewhat more likely to use a condom, and 3.4% will abstain.

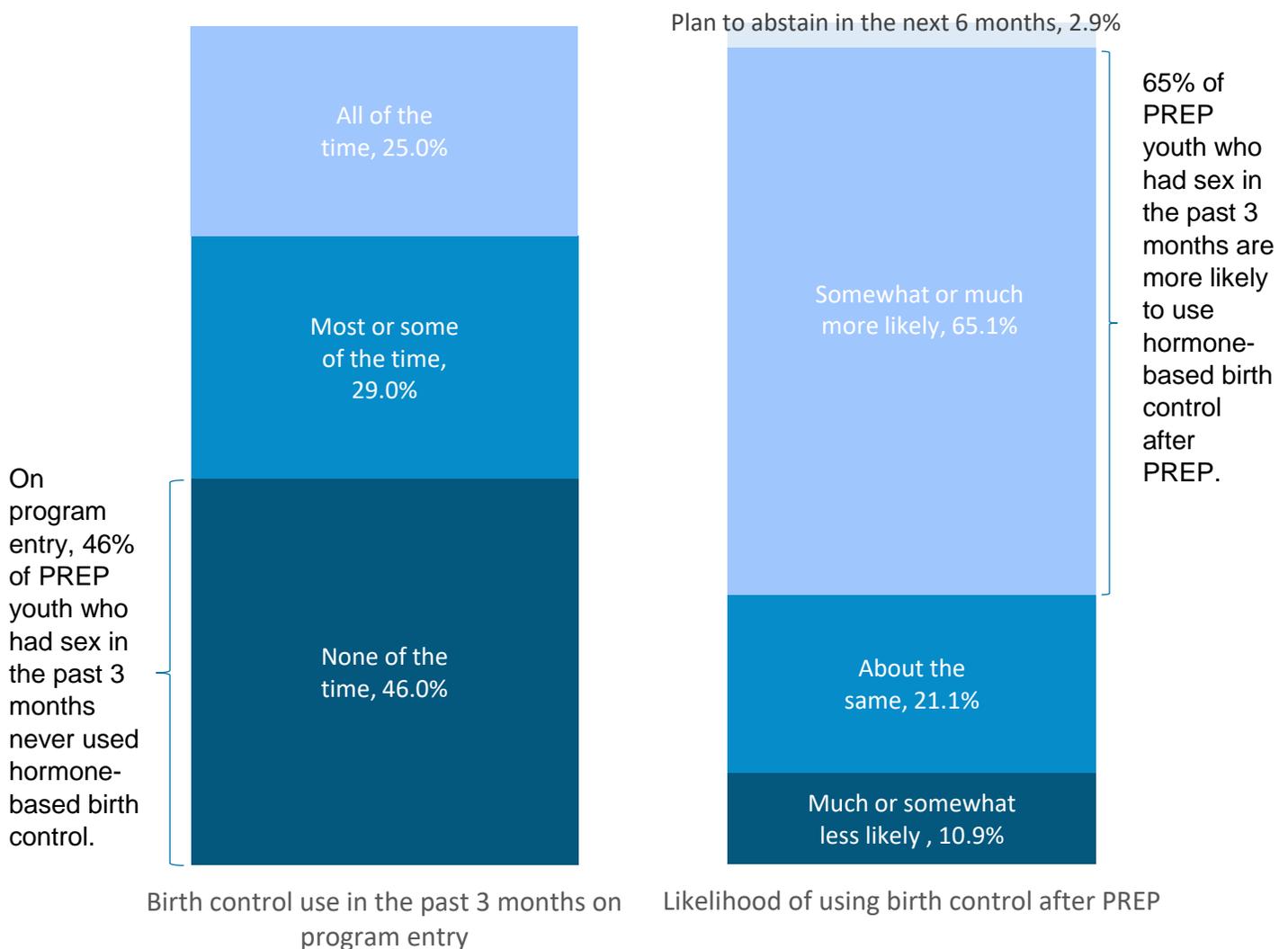
Figures 4 and 5: Of PREP youth who have had sex in the past three months, 47% did not use a condom upon entering the program, and 62% are more likely to use a condom upon exit.



Intention to Use Birth Control

The following chart represents youth with matched entry and exit surveys who completed 75% of the program and reported having sex in the last three months (180 youth). Similar to condom use, just over half of youth used birth control at least some of the time before the program. Birth control is defined as pills, condoms, the shot, the patch, the ring, IUD, or an implant. After PREP, 65% of youth are somewhat or much more likely to use birth control, and 3% will abstain.

Figures 6 and 7: 54% of youth who have had sex in the past three months used birth control all or most of the time on program entry, and 65% are more likely to use it after PREP.



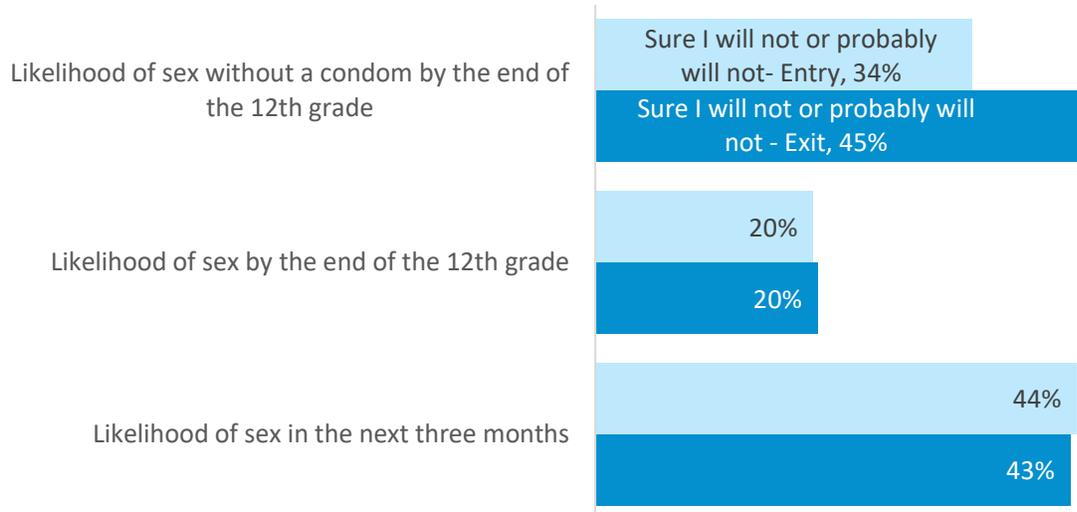
Youth are asked how sure they are that they could engage in six safe sexual behaviors. The four-point scale is as follows: *I'm sure I could NOT*, *I probably could not*, *I probably could*, or *I'm sure I could*. The chart represents *I probably could* and *I'm sure I could*. Over 90% of youth could buy a condom at both entry and exit. The most improvement is seen in the percentage of youth who could keep from having sex without birth control and insist on using a condom if their partner didn't want to.

Figure 8. Intentions to engage in safe sexual behavior before PREP and after PREP.



Youth are asked how likely they are to engage in sexual activity before and after PREP. Little to no change is seen in the likelihood they will have sex by the end of the 12th grade or in the next three months. The percentage of youth reporting they will not or probably not engage in sex without condoms by the end of the 12th grade improved 11 percentage points from entry to exit.

Figure 9. From Entry to Exit, 11% more youth report that they will not have sex without a condom by the end of 12th grade.



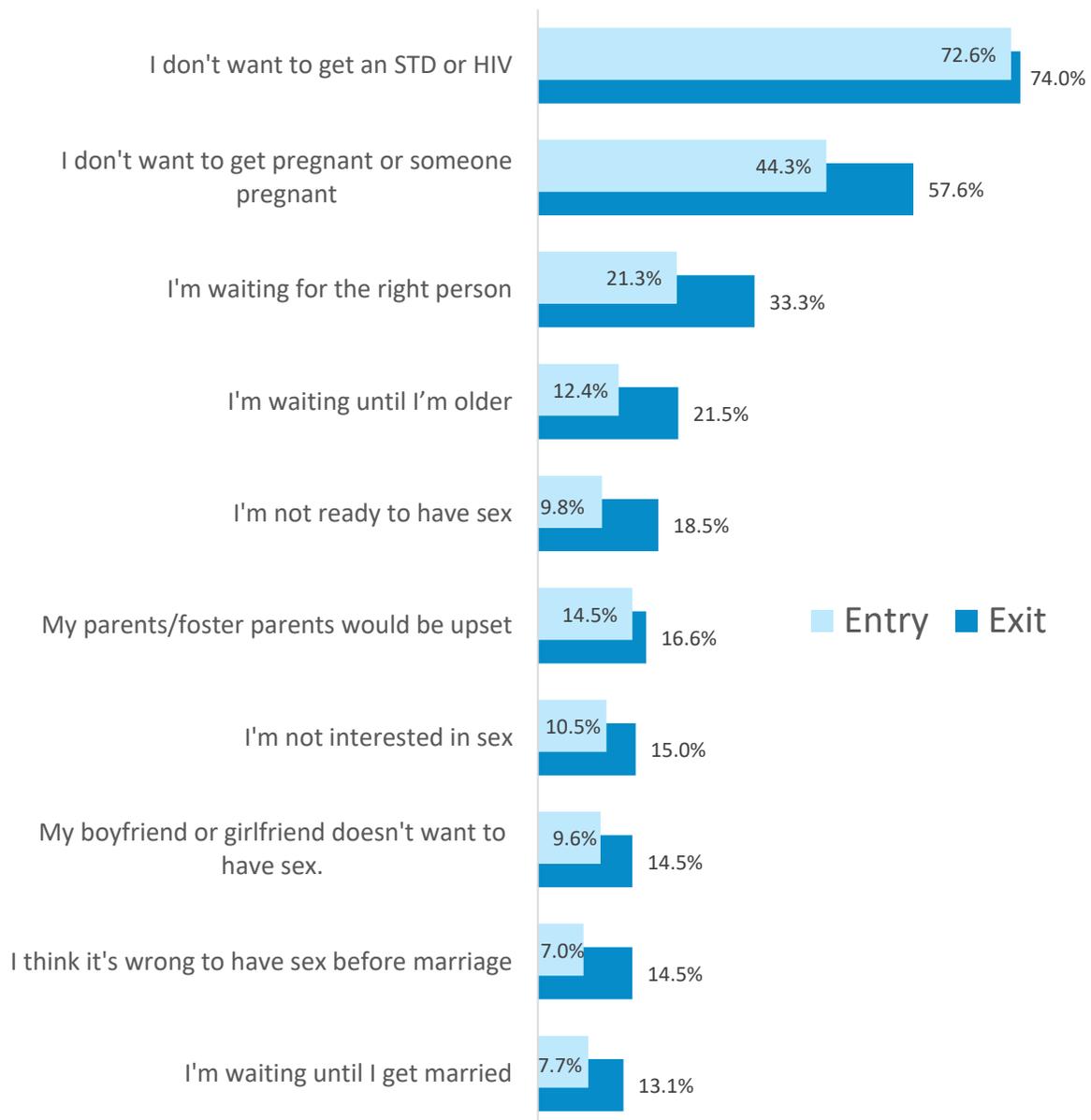
“Don’t have sex if you don't have protection.”

~ Youth Participant after PREP

Reasons for Not Having Sex

Youth are asked to indicate reasons for not having sex on both the entry and exit surveys. Not wanting to “get an STD or HIV” is indicated by nearly three quarters of the youth on both the entry and exit forms (Figure 8). The statement with the most change is, “not wanting to get pregnant or get someone pregnant”.

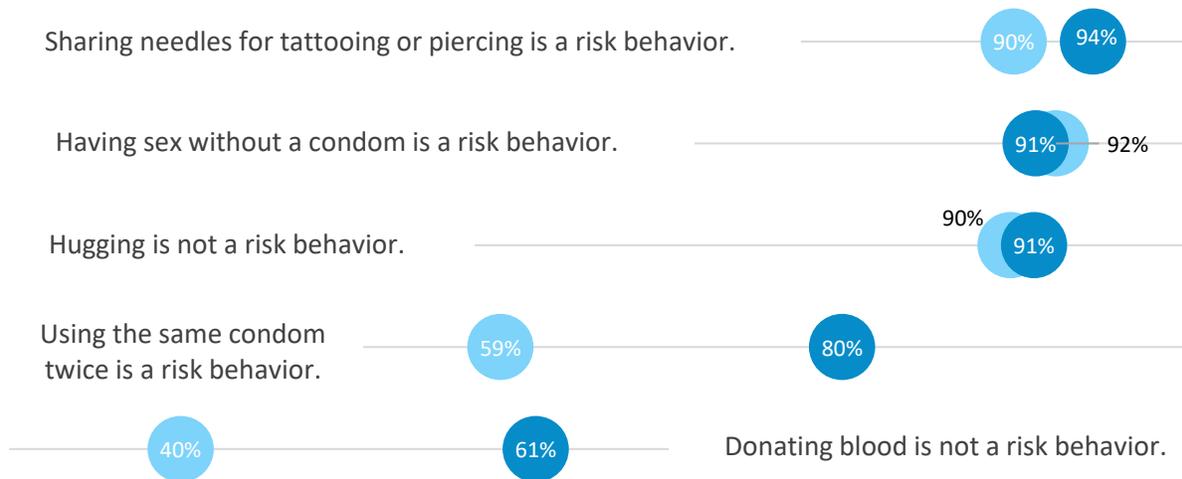
Figure 10. The most change is seen in the percentage of youth who are waiting to have sex to avoid pregnancy.



Knowledge Gains after PREP

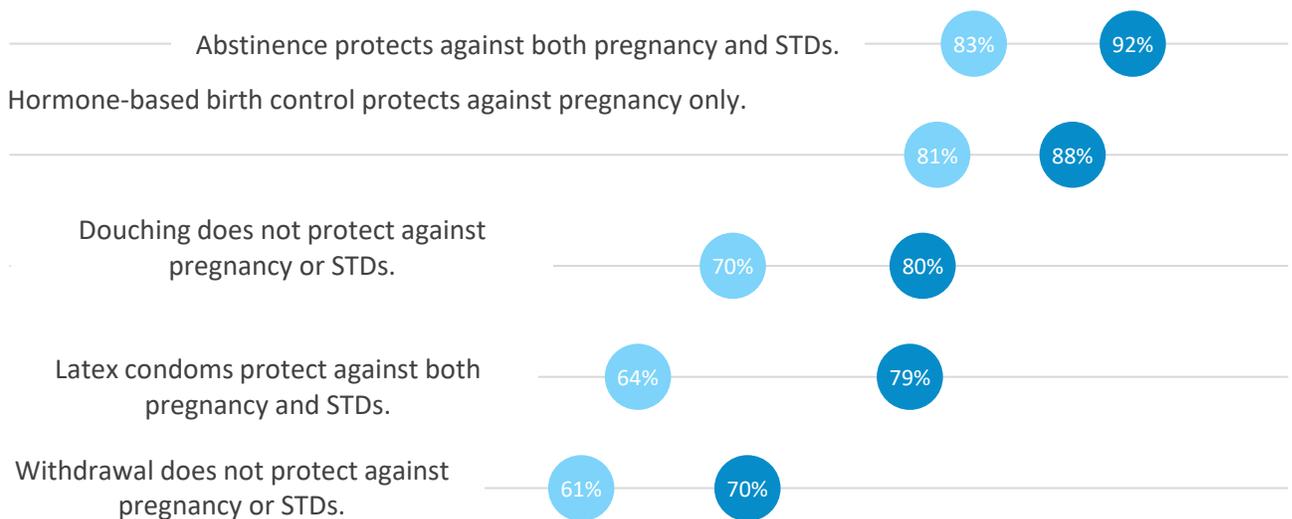
The following section represents youth who completed 75% of the curriculum and have a matching entry and exit survey (range of 408 to 421 answering the questions). The first set of questions focuses on knowledge of HIV risk behaviors. Knowledge that using the same condom twice is a risk behavior and that donating blood is not a risk behavior show the most improved correct responses from before to after PREP.

Figure 11. Knowledge of HIV risk behaviors before PREP and after PREP.



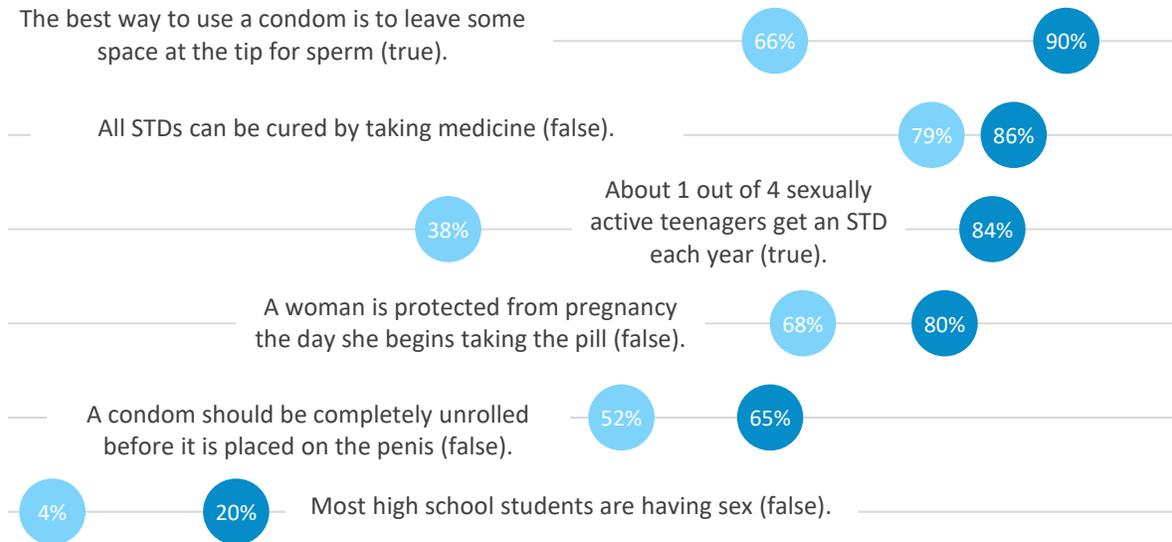
Youth also show the most improvement in knowledge on latex condoms. They are asked whether five sexual behaviors protect against pregnancy and STD/HIV, pregnancy only, or neither. Figure 12 shows the percentage answering correctly (among the three response options) before and after PREP.

Figure 12. Knowledge of HIV risk behaviors before PREP and after PREP.



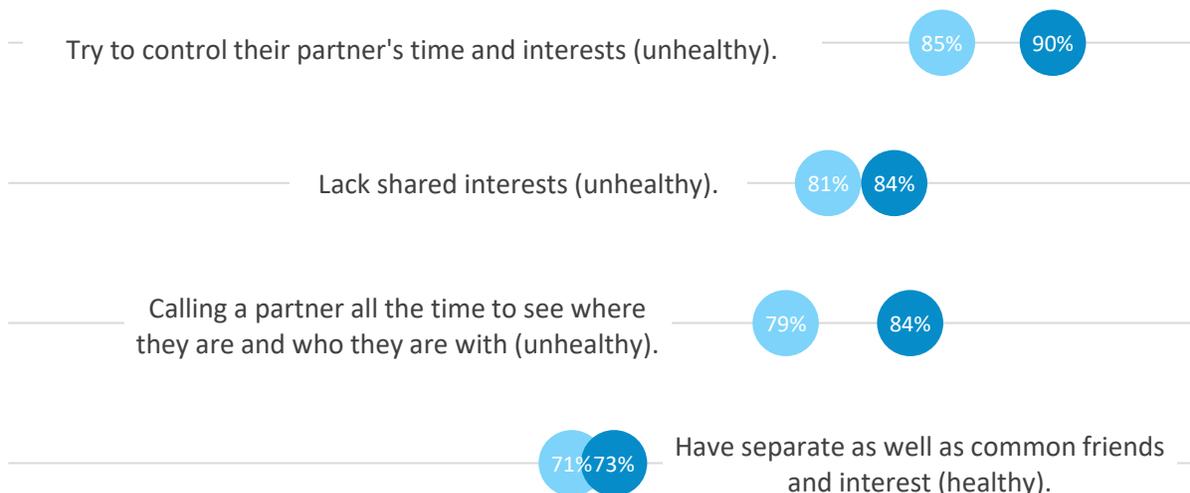
Six true or false questions focus on knowledge of sexual health. The percentage of youth answering correctly improved for each question. The highest improvement is knowledge that 1 of 4 sexually active teens get an STD each year. At exit, the highest percentage of youth answered correctly about the best way to use a condom.

Figure 13. Knowledge of teen STD rates and how to use a condom improved most from before PREP to after PREP.



Four questions focus on unhealthy and healthy relationships. Very high percentages of youth correctly indicated whether the behavior is healthy or unhealthy at both entry and exit.

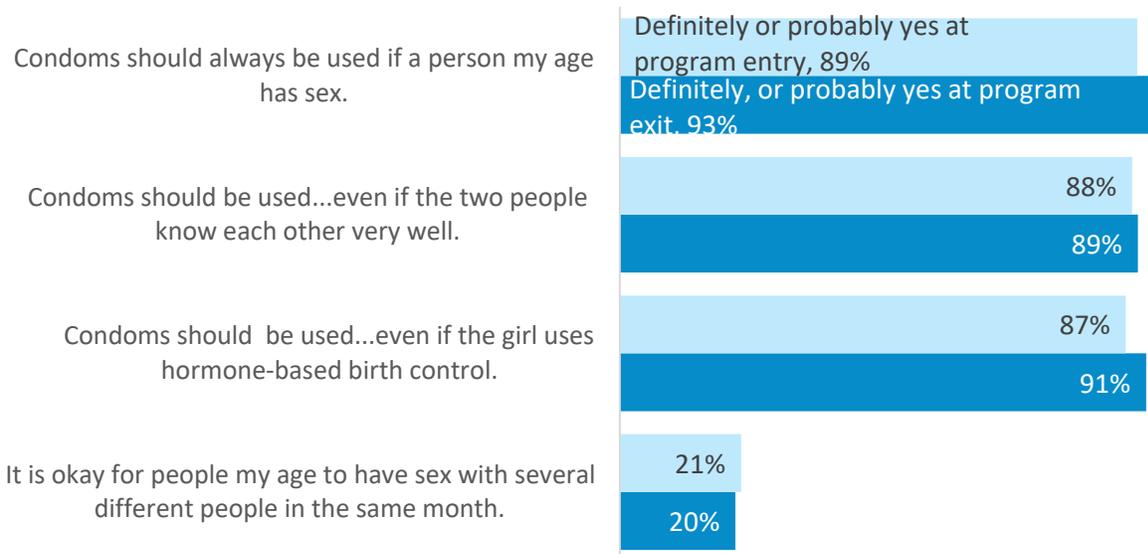
Figure 14. Knowledge of healthy relationship behaviors before PREP and after PREP.



Youth Beliefs

Youth are asked their opinions on sex and condom use before and after PREP. Unlike changes in intention to use condoms, there is very little change in beliefs about condoms.

Figure 15. Little change in youth beliefs on sex and condom use is seen after PREP.



Youth Program Perceptions

It is evident that youth participants generally have positive perceptions of the PREP sessions and climate, and they are comfortable engaging in the program. Not only do they indicate this in response to specific questions (Figures 16 and 17), as discussed on the following pages, they also predominantly write “no” or “nothing” when specifically asked for suggestions to improve the program and some go as far as writing “no, it’s good as it is.”

All youth with an exit survey responding “all of the time” or “most of the time” to the positive statements about PREP are shown below.

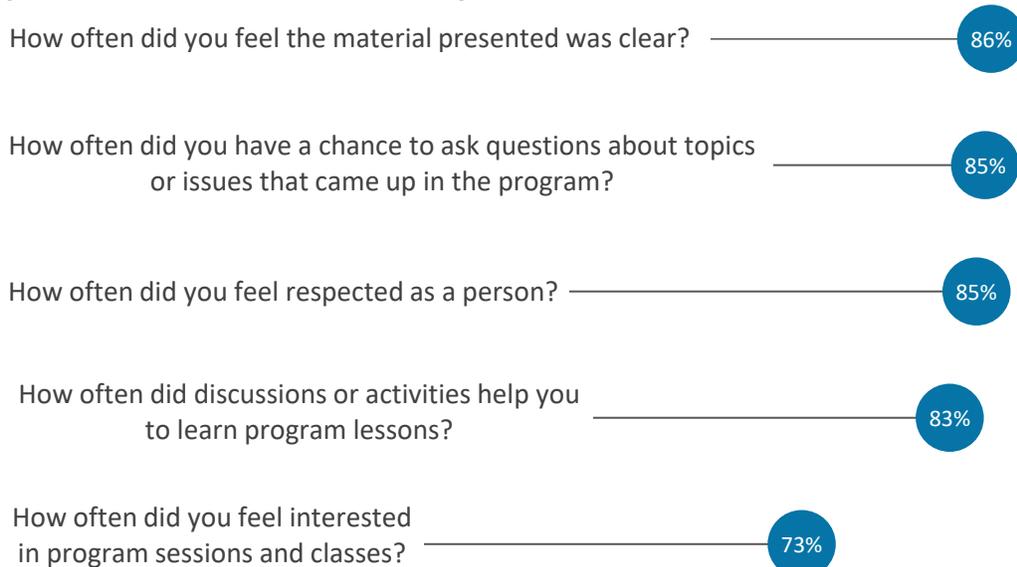
“I like the way it helps me be successful in life”

“I learned a lot, we discussed real life situations.”

“I like that we all got to talk and be all open with talking.”

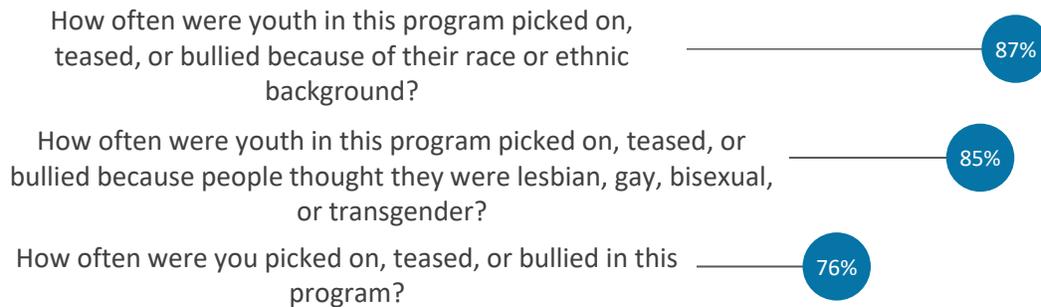
“It was entertaining and educational”

Figure 16. PREP youth respond "most of the time" or "all of the time" to positive statements about their experience.



Again, all youth with an exit survey are included in the chart below. Three quarters of youth report they were never picked on.

Figure 17. Percentage of PREP youth selecting "never."



Youth Survey Response Statements at Exit

The youth exit survey includes five open response questions addressing what youth learned as well as the strengths and weaknesses of PREP. Specifically, the exit survey asks youth about: the three most important points they learned, what they liked most and least, what they still wanted to learn, and suggestions for improving the program in the future. All youth who completed the exit survey and responded to the questions are included in this summary.

Findings:

- ✓ A substantial number of youth reported there was nothing they liked least about the program, and some even liked every part of PREP
- ✓ Many youth noted they learned a lot about sexual education and sexual health and many reported that's what they liked best while others reported it's what they liked least.
- ✓ Many youth felt that an adequate range of topics were comprehensively covered, so they did not feel that there was more to learn, nor did they have suggestions for improving PREP
- ✓ Some youth wanted financial education to be covered more thoroughly

The majority of youth reported they learned about many topics related to sexual health from participating in the PREP program. "Sexual health" is an umbrella term that encompasses topics such as pregnancy, abstinence, and the prevention and treatment of sexually transmitted infections. One respondent said they learned that "it's all right to abstain; don't give into peer pressure [and] just cause "everybody is doing it" doesn't mean you have to." Another indicated, "you need to wear a condom 'cause STDs are very common

even if you don't see the disease doesn't mean they don't have it." The importance of using contraceptive methods, such as condoms and birth control, were expressed throughout the exit survey. Similarly, many respondents noted that the PREP program taught them about healthy relationships. These responses were reflected in a variety of ways, from sentiments like "[it's] good if you and your partner get tested" to "the different signals on risk and why they are important."

Many youth indicated learning about topics related to sexual health was what they liked best about the program. For example, one respondent noted they enjoyed "learning about how to prevent having kids and STDs and other diseases," and another reported that the PREP program "taught me more about how to keep myself safe and have healthy relationships." Besides sex education, another theme on what they liked best was simply the educational aspect of the program. "Education" takes many different forms and encompasses many topics covered in the program. One respondent noted that they enjoyed learning the "different ways you can save your money and how to choose the right bank you go to and how to write a check the right way." Another respondent observed the program is "teaching people about life instead of trying to teach us about some stupid [things] no one's ever gonna use in life." Additionally, many youth enjoyed the positive atmosphere created by staff. For example, one respondent wrote: "the people who teach it because it makes it understandable," and another indicated they enjoyed "how easy and comfortable it was to talk about awkward topics." The sentiment "everything is gone [going to] help me a lot in life" expressed by one respondent is reflected across the participants' responses.

About a quarter of the youth surveyed indicated there was nothing that they liked least, or that the question itself was not applicable to their experience in PREP. In conjunction with these results, other youth noted that they "liked everything" about the program. Outside of this, the youth surveyed gave a variety of answers to address the question of what they liked least about the program. Several were not opposed to the content covered in PREP, but rather the length of the program, claiming that "it was kinda long." Others did not like learning about different methods for having safe sex, specifically citing "the weird video about putting on condoms" as being particularly off-putting to many. Related to safe sex, the discussion about STIs, STDs, and HIV/AIDS was liked least by a minority of the youth. Many felt that "it was uncomfortable talking about certain parts and concepts," including infections that could be contracted by having unsafe sex. Several other components were referenced as being the least-liked part of the program, although "financial literacy" was another notable answer.

According to the survey results, a substantial number of the youth surveyed felt there was nothing additional they wanted to learn. Many felt that this question was not applicable to their experience, while around an equal number of teens felt that the program was

adequately comprehensive, several claiming that “I learned everything I wanted to learn.” Many who did express wanting to learn about additional topics wanted to learn about different aspects of financial literacy, especially budgeting and saving money. Several also wanted to know more about “how to protect yourself” when engaging in sexual activities. Many of the answers provided covered a range of unrelated topics, such as “how to deal with stress and anger,” “long term effects of having a baby,” and “how to cook.”

Over half of the youth surveyed after completing PREP did not have suggestions to improve future iterations of the program. Several other respondents felt that providing suggestions was not applicable to their experience in PREP. Others believed that the program “was good the way it was.” Various suggestions were provided, ranging from a request to “include LGBTQ community better” to having “more interactions and less of the instructive teaching.” Most of the suggestions applied to the structure of the program more than to the content. Many youth surveyed would have liked to see “more skits and role play” and to have more and “better” instructional videos.

Program Implementation

Ohio’s PREP program targets youth ages 14 to 19 who are in foster care or the juvenile justice system. Using a train-the-trainer model, Ohio PREP provides state-level trainings to nine regional sub-grantees, which then provide training to foster care and juvenile justice agency-level staff. The program uses a focused approach of reducing risk-taking behaviors by advocating for contraception use or delay of sexual contact to avoid HIV/STIs and pregnancy. The program consists of 16 course modules focused on sexual health and four additional modules addressing healthy relationships, career building, and financial literacy. Programs are charged with delivering these modules over a span of two days (16 hours) at minimum and 30 days at maximum (under 30 days being the ideal timeline).

ODYS sets the following four goals for PREP:

-  Reduce teen pregnancy and STI rates (including HIV/AIDS) in target populations;
-  Increase the number of youth in the target populations who successfully transition to adulthood;
-  Increase standardized in-service training for child welfare and juvenile justice professionals to promote delivery of evidence-based, competence-based teen pregnancy and STI prevention; and
-  Increase standardized in-service adulthood preparation training of youth in the target population.

Evaluation Team Key Activities include:

- ✓ Collecting implementation data via online staff surveys, site visits (four) and focus groups with Facilitators (two).
- ✓ Providing youth and facilitator entry and exit or pre and post instruments as well as managing data collected via the instruments.
- ✓ Analyzing program data to evaluate program effectiveness and participant knowledge and intention changes.
- ✓ Creating data summaries and reports for the federal PREP program, ODYS and Ohio PREP sub-grantees.
- ✓ Presenting program findings to PREP sub-grantees, stakeholders, and the federal government.

Regional PREP Staff Insights

Primarily three evaluation activities inform this section, including two teleconference focus groups in June 2018 with PREP Facilitators; online surveys deployed in spring 2018 to Ohio PREP Facilitators, Master Trainers, Administrators, and Regional Coordinators; and lastly, site visits to four of the nine regional coordinating entities. The following themes emerged.

These data sources reveal that updated materials as well as a reorganized curriculum are necessary in order to facilitate PREP more efficiently. For example, various staff members suggested reformatting the curriculum so that the material better blends into each topic taught within PREP. ODYS, in working with Regional Coordinators, is addressing this issue.

The survey and focus groups yielded mixed responses from Facilitators in regards to the training they received. While many felt they were fairly well prepared to teach PREP, one Facilitator interviewed in a focus group said that because the training did not cover every session they would later have to teach, it was “kind of confusing the very first time.”

Reviews were also mixed regarding a Prezi developed for implementing Ohio PREP with youth. Some staff appreciated the Prezi and thought it was helpful while others found it cumbersome and less helpful. An additional barrier to using the Prezi is a lack of internet access at a number of sites implementing PREP.

Facilitators noted that when the courses were taught in all-day sessions, participants often lost focus. They clarified that this issue was more of a logistical factor rather than an issue with PREP. One Facilitator suggested there should be curriculum options, “maybe a longer version for those

long-term facilities and then maybe a shortened, quicker version for the centers like mine where the turnover rate is so quick.” The prior evaluation data has also shown a substantial proportion of youth do not complete the programming (roughly one third). The ODYS has reviewed available youth STI and pregnancy prevention curricula and selected a somewhat shorter curriculum called Making Proud Choices. Staff are being trained in a train-the-trainer model, and the programming will be implemented in 2019. The individual sites across the state will have the choice to implement either of the two curricula.

Generally, Facilitators reported that youth participants were interested in topics related to sexuality, STIs, and general health, but less interested in the healthy relationships and the financial literacy modules. One Facilitator stated they “think for the career and financial part, maybe the age limit should be increased for those sections, because some kids just have no idea at that point.” Another Facilitator said that when they try to teach participants about finances, “some of the kids shut down.”

The role-plays within the RTR curriculum were also met with varying positive and negative opinions. One Facilitator reported, “The biggest struggle we face is that the scenarios in PREP are not realistic for our youth. Most of the youth we work with live in a culture where it has become typical for one night stands to occur, people sleeping with multiple partners at a party, youth regularly cheating on other youth, etc. The scenarios may work for a handful of youth but most of the time, we have to adapt the curriculum to fit our youth's real life. Since we have been doing this for so long, we are able to do so; however, it would be helpful if some of these issues were addressed in the curriculum itself.”

Some Facilitators said it would be better if the program could have a wider reach by allowing 13-year-olds and sex offenders to participate. One Facilitator said “we work with sexual offenders and they cannot engage in the training which we all kind of feel like they need something along these lines, as far as the sex education and the healthy boundaries and consent and different things like that. So we have to find alternate things for them to do while our other youth are in PREP.”

Staff said that making the curriculum more accessible in terms of literacy will benefit PREP. “We wanted them to change the wording on the pre post, the evaluation is at a 10th or 11th level and it should be at a third grade level at the highest,” a staff person explained. “We started doing group reading through the questions and if they needed help, we would help them individually.”

Facilitators expressed a range of satisfaction with the PREP program as it currently exists and offered feedback for how to improve the program. PREP is best implemented by Facilitators that “really believe in the program,” as one staff person said. One Facilitator remarked that PREP is “a

program where you can actually bring in your group of kids and you have set time to making sure that you are reaching all those kids on all of those different subjects.”

Facilitator Training

In order to implement PREP broadly throughout the State, staff are trained and provided refresher trainings on a regular basis. Staff participating in the trainings complete pre and post assessments on knowledge of STI prevention/transmission and youth rights related to accessing STI testing. The pre and post assessments also measure Facilitators’ confidence levels for implementing the programming with youth.

There is an increase in the mean scores of knowledge (out of 10 knowledge questions) and confidence levels (total possible score of 80) among the 54 newly trained Facilitators (who completed the revised instrument). Additional Facilitators participated in the training as a refresher from prior training.

Figure 18: There is an increase in newly trained Facilitators’ knowledge and confidence.

Assessment	Mean Pre (SD)	Mean Post (SD)
Knowledge	6.54 (1.701)	8.70 (1.312)
Confidence	65.89 (10.337)	72.37 (11.025)

The Facilitator trainees are also asked open response questions, and unlike the above analyses, all of their responses (on the revised instrument) are included here. There is a high level of satisfaction and engagement among the training participants. Of the 90 individuals who completed the training, 78 indicated their overall thoughts about the training. Most of the responses to this question (70) were very positive, such as, “very good” and “helpful!” Another five responses were positive but slightly less so such as, “Youth can benefit from this course to develop life skills.” While the overall comments were positive, Facilitators provided some specific and varied suggestions regarding the training, all of which were provided to ODYS staff who have program oversight.

Ohio PREP Revisions

As noted previously, Ohio plans to implement Making Proud Choices³ in the coming year and is in the process of training staff. Additionally, upon receiving feedback from PREP Facilitators and Coordinators about challenges with inconsistencies and less than ideal organization of the PREP curriculum, ODYS staff engaged Ohio PREP Coordinators in revamping the adulthood curriculum. The workgroups have worked diligently to improve these components and thus ease implementation of the curriculum for PREP Facilitators.

Cohort Length

The average number of days between starting and finishing the curriculum for the 103 PREP cohorts in the past program year is 38.9. At minimum, the curriculum was finished in two days, and at maximum, 196 days. This is an overall improvement from prior analyses of the data, which showed an average cohort completion of 49⁴ days. Facilitators implementing the programming with youth track attendance data, which was used to calculate the cohort completion length. Regional Coordinators then collect the attendance forms and send them to the evaluation team.

⁴ HHS Office of Adolescent Health, (2018) Retrieved from: <https://www.hhs.gov/ash/oah/grant-programs/teen-pregnancy-prevention-program-tpp/evidence-based-programs/making-proud-choices/>.

Conclusion

Ohio PREP has made substantial gains in the 2017-2018 program year. Nearly every question on knowledge, beliefs and intentions posed to Ohio PREP youth show improvements from program entry to program exit. Further, youth perceive the program positively, as evidenced by their responses about being respected and able to ask questions and by the statements they wrote on the exit survey. While some youth were unable to complete the evidence-based Reducing the Risk curriculum, nearly two-thirds of the enrollees did so. Additionally, Ohio PREP focuses heavily on continuous program improvement, as is demonstrated by reducing the average length of a cohort as well as by the effort of revamping the adulthood components.

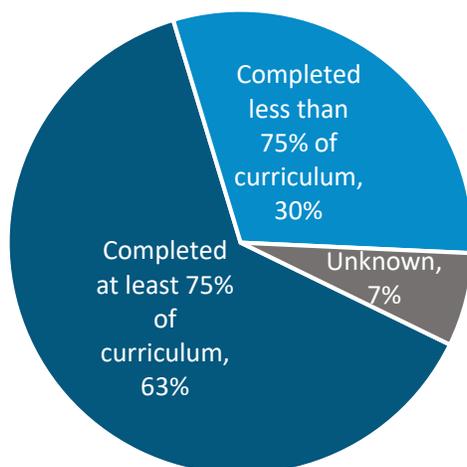
Options for Action

-  Administering a pretest for youth who enter the program after the first session/s may be beneficial for reporting youth knowledge gains and other results.
-  Sub-grantees may benefit from standardized observation data recording tools and content organized to follow course structure and fidelity.
-  The language employed throughout the program materials used with youth, as well as in trainings for Facilitators, should be consistent and up-to-date. An example is interchanging use of “STI” and “STD”.

Appendix

Demographics

Of 894 youth tracked by Instructors, 63% completed 75% of the PREP curriculum.



891* individual youth are represented across the entry, exit and attendance databases.

Region	#	%
1	51	6%
2	38	4%
3	68	8%
4	90	10%
5	138	15%
6	80	9%
7	158	18%
8	105	12%
9	163	18%
Total	891	100%

*Region is unknown for three youth.

Instructors record the setting of sessions. Most youth are served in the juvenile justice system, 71.7%. Twelve percent are in foster care, and 16.3% are in another setting.

Setting	#	%
Juvenile Justice	641	71.7%
Foster	107	12.0%
Residential Facility	58	6.5%
Unknown	58	6.5%
Probationary Program	30	3.4%
Total	894	100.0%

Most youth report black or white race, and straight orientation.

Race	#	%
Black	346	50.5%
White	337	49.2%
American Indian/Alaska Native	39	5.7%
Native Hawaiian/Pacific Islander	6	0.9%
Asian	4	0.6%
Sexual Orientation	#	%
Straight	602	87.9%
Bisexual	44	6.4%
Gay or Lesbian	16	2.3%
Transgender	1	0.1%
Undecided	14	2.0%

Ohio PREP Regional Map



- | | |
|---|--|
| Region 1: Lucas County Health Dept. | Region 6: Canton City Health Dept. |
| Region 2: Planned Parenthood of S.W. Ohio | Region 7: Cuyahoga County Board of Health |
| Region 3: Planned Parenthood of S.W. Ohio | Region 8: Summit County Public Health |
| Region 4: Nationwide Children’s Hospital | Region 9: Nationwide Children’s Hospital |
| Region 5: Belmont, Noble & Perry County Health Dist./Dept. | |



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