Hypotheses and Analyses
We expected that students in schools that received the modified Reducing the Risk curriculum would be more likely than their peers in schools that received the original Reducing the Risk curriculum to remain abstinent at follow-up. For sexually experienced students, we expected that those who received the modified intervention would be more likely to have used condoms and less likely to have used alcohol at last intercourse than would those who received the original intervention. However, we also hypothesized interaction effects between curriculum and personality characteristic variables. Specifically, we expected that the effects of the modified version would be stronger for high sensation-seeking individuals and impulsive decision makers than for low sensation-seeking individuals and rational decision makers. In addition, we hypothesized that students in both Reducing the Risk groups combined would be less likely than comparison students to initiate sexual activity, more likely to use condoms and less likely to use alcohol when having sex.

Hypotheses regarding initiation of sexual intercourse and use of condoms and alcohol were tested using logistic regression, and hypotheses regarding frequency of condom use and alcohol use with sex were tested using mixed model hierarchical linear regression. For sexually inexperienced students, we tested the likelihood of remaining abstinent versus initiating sexual activity after completing the curriculum.

Analyses of the effects of change in each mediating variable were conducted first for the overall sample, then separately for high sensation-seeking individuals, low sensation-seeking individuals, impulsive decision makers and rational decision makers. The analyses controlled for educational aspirations, race, gender, relationship status and city.

RESULTS
Sample Characteristics and Retention
The sample was a moderately diverse, urban, ninth-grade school sample: Males and females were nearly equally represented; about half of participants were white, and one-third were black (Table 2). Most students were between 14 and 15 years old. Almost 40% of the sample reported being sexually experienced; of those, 55% said that they always use condoms. We tested the comparability of the three curriculum groups on several variables associated with the outcome of interest: gender, race, age, city, relationship status, high school grades, educational aspirations and socioeconomic status. The groups differed on only three of these (Table 3). A significantly smaller proportion of students receiving the standard school curriculum than of those in either intervention were male—42% versus 51% for the original intervention and 50% for the modified intervention. A smaller proportion of those receiving the modified Reducing the Risk intervention than of those in the other groups were white. A significantly lower proportion of Reducing the Risk group participants than of participants in the standard school and modified Reducing the Risk intervention groups were black. And finally, a higher proportion of the modified Reducing the Risk group participants than of the other groups’ participants wanted to attain advanced degrees.

Overall, 76% of baseline participants completed follow-up surveys at 3–6 months. Retention was fairly evenly...