

Introduction

The Office of Population Affairs (OPA) expects grant recipients to ensure that materials and information disseminated through their project is appropriate and responsive to the needs of the community and population of focus. Teen Pregnancy Prevention (TPP) Program Tier 2 recipients **must ensure** all materials used and information disseminated within the funded project are **age appropriate** and **medically accurate**. OPA also expects recipients to make materials and information **culturally and linguistically appropriate, trauma-informed, and inclusive** of all youth (see Appendix C for definitions of terms). Materials and information covered by this expectation include, but are not limited to:

- Materials associated with the intervention to be studied (e.g., facilitator manual, scripts, participant booklet, videos, etc.)
- Supplemental materials and information (e.g., pamphlets, handouts, facilitators' answers to participant questions, etc.)
- Materials and information used, shared, and disseminated with participants and/or the community (e.g., web content, social media posts, podcasts, presentations, newsletters, posters, etc.)

Recipients are expected to inform OPA of their review process, findings, and plans to address any issues identified as part of their Semi-Annual progress reports. Recipients should ensure subject-matter experts are a key part of the review process. Recipients are responsible for making necessary changes during the planning year **prior to** beginning their full evaluation study.

Recipients will be expected to regularly conduct their materials review process, at least annually, to ensure that materials and information shared with the community and population of focus **remain** age appropriate, medically accurate, culturally and linguistically appropriate, trauma-informed, and inclusive, however **any change proposed to the intervention after the study begins must be reviewed and approved by OPA in consultation with Evaluation Technical Assistance (Eval TA) provider.**

Recipients may not begin full evaluation or use and disseminate materials without prior approval.

Note that OPA requires recipients to submit their program materials **specifically for a medical accuracy review** during the planning period. Recipients are expected to coordinate their own review for age, cultural, and linguistic appropriateness and trauma-informed and inclusive language and approaches both during the planning period and in subsequent years of the project. As part of continuous quality improvement, recipients should ensure materials remain medically accurate and include a medical accuracy review in subsequent years.

This guidance is intended to provide a clear understanding of what the expectation is related to materials review, why it's important, and how to demonstrate to OPA that the expectation is being met. An important note is that you will see the word "materials" used throughout, sometimes in conjunction with the word "information" and sometimes on its own. References to "materials" always includes any information, whether on paper, virtual, or verbal that is shared with the community and population of focus and related to your project.

Why Conduct Materials Review?

It is critically important that the information shared with youth, their families, and the community is medically accurate, age, culturally, and linguistically appropriate, trauma informed, and inclusive of all youth. Not only does conducting a materials review help ensure that the programs and interventions we are evaluating are appropriate, relevant, and a “good fit” for the community and population of focus, it also serves as the foundation for the credibility and reputation of an organization in a community. More so, it is the *right thing to do* and what youth deserve. For public health efforts to be effective and to truly advance equity in adolescent health, young people must be able to trust the adults sharing information and resources. False and/or misleading information can spread, leading to known and unknown harms in the context of public health and health equity. Harm can include reinforcing stigma and fear, promoting negative behavior, and/or diminishing the importance of making informed, healthy decisions.

How to Conduct Your Reviews?

There are different ways to conduct your material reviews. You and your project team will have to decide the process that will work best for your project. Regardless of the method selected, OPA has a few expectations and recommendations.

OPA Material Review Expectations

- Develop a process for materials review and detail the process in your work plan. Include who is responsible for managing the review and what individuals will be involved in the actual review of materials and content (i.e., subject matter experts), when and how often materials will be reviewed, and how information will be relayed to the project team (including implementers) and OPA.
- Review all materials to be used and information to be shared during the intervention study to ensure that they are medically accurate, age, culturally, and linguistically appropriate, trauma-informed, and inclusive. Recipients should submit materials **specifically** for an independent medical accuracy review online during the planning year by uploading them to their MAX/Connect.gov page. OPA will contract with independent medical accuracy reviewers to complete the review for each intervention to be studied. The reviewers will provide a summary report of any recommended modifications to improve medical accuracy on the recipient’s MAX/Connect.gov page.
- Make the necessary, recommended modifications to the intervention as a result of the review **prior to beginning the full evaluation study** to ensure materials are culturally, linguistically, and age appropriate, medically accurate, inclusive, and trauma informed.
- Report on materials review process and progress in your semi-annual progress report.
- Certify that program materials associated with the intervention to be studied have been reviewed and issues have been addressed by uploading a signed (manual or electronic) form as a Grant Note in Grant Solutions. See Appendix A as an example of the certification form to submit to OPA.
- Conduct material reviews on a continuous basis (at a minimum, annually) as part of your standard monitoring and improvement process. To protect the integrity of the evaluation

study, **any changes recommended because of ongoing monitoring and improvement should be discussed and approved by OPA with Eval TA input.**

OPA Material Review Recommendations

- Identify what expertise/perspectives should be reflected as part of this review and have multiple individuals with relevant experience and expertise review materials. Don't forget to include individuals representing the population of focus (i.e., youth) as well as key stakeholders (e.g., parents/caregivers).
 - For age appropriateness, cultural and linguistic appropriateness, and inclusivity, the review should be focused specifically on the population served by your intervention to be studied and involve individuals with experience working with and/or from your population of focus (e.g., youth, teachers, implementers, education/curricula specialists, parents/caregivers, etc.).
 - For trauma-informed, the review should include individuals with experience and expertise in trauma-informed approaches (e.g., counselors, social workers, licensed mental health workers, etc.).
 - For medical accuracy review (to be completed by the recipient during years 2-5 only), select individuals with medical or health education backgrounds/credentials (e.g., physicians, nurse practitioners, registered nurses, adolescent health education specialists, reproductive health specialists, public health specialists).
- Identify who in your organization may be qualified and have the capacity (i.e., time) to review materials for the various items identified in the expectation.
- Identify what expertise is missing and needed as part of this review. Determine how you will fill this need. For example, will you contract with experts in the field? Will you leverage partner staff who can fill this expertise?
- Ensure that any experts engaged as part of this review are qualified and reputable individuals. Remember that your reputation and credibility are at stake when information is disseminated by your organization, therefore ensure that the outcome of this review results in materials that are complete, accurate and relevant to your community and population of focus.
- Create a [template review form](#) for all reviewers to use to include documenting issues found and recommendations on how to address issues. When relevant, ask reviewers to use citations to support recommended changes. Note that these reports **do not** have to be submitted to OPA unless there is a concern about the extent to which you are meeting this expectation.
- Train individuals on the process, why it's important, your expectations, and timeline for review. Share resources that may be helpful as part of their review. (See Appendix B).
- Determine how you can embed this process into your organization's policies and protocols. What other resources do you need beyond staffing and training? What policies need to be revisited to make this a priority and reflective of your organization's mission? What written protocols can be developed for this process that it is reflective of all communication that is shared by your organization? Develop an action plan for how you will achieve this over the course of the five-year project and embed action items into your work plan each year.

Appendix A: Sample Materials Review Certification Form to Submit to OPA

DIRECTIONS

The Office of Population Affairs (OPA) expects TPP Tier 2 Rigorous Impact Evaluation grant recipients to review all intervention materials to be used in their rigorous impact evaluation. *Materials* is an all-encompassing word used to refer to any written and verbal information related to the intervention to be rigorously evaluated under this grant program. This may include but is not limited to program curriculum, facilitator guides, pamphlets, posters, etc. At a minimum, these reviews should ensure that all materials are medically accurate, age appropriate, culturally, and linguistically appropriate, trauma-informed, and inclusive of all youth. OPA requires grant recipients to demonstrate that materials to be used have been reviewed and that any identified issues have been addressed. Below is an example template of a form that grant recipients may use to certify that materials have been reviewed and appropriately updated, however recipients may use *any format that appropriately meets this requirement*. The form should be uploaded as a Grant Note into Grant Solutions.

REVIEW INFORMATION

- Review Completed Date:
- Review Coordinator:
- Reviewer Names (include area(s) of expertise):

REVIEW CERTIFICATION

I certify that all materials for **[insert intervention to be studied here]** have been thoroughly reviewed for the following:

- ✓ Medical Accuracy
- ✓ Age Appropriateness
- ✓ Cultural and Linguistic Appropriateness
- ✓ Trauma Informed Language and Approaches
- ✓ Inclusive Language and Approaches

All recommended updates to improve the medical accuracy and appropriateness for the intervention's population of focus have been made **prior to the full evaluation** of the intervention. To protect the integrity of the intervention study, any proposed changes to the intervention that are identified as a result of regular review of materials and ongoing monitoring and improvement after the study begins will be discussed with and approved by OPA with input from Eval TA providers.

Name:

Title

Date:

Appendix B: Helpful Resources

Adolescent Development

Adolescent Development Explained

<https://opa.hhs.gov/adolescent-health/adolescent-development-explained>

Age Appropriate

Health Education Curriculum Analysis Tool (HECAT)

<https://www.cdc.gov/healthyouth/hecat/index.htm>

Culturally and Linguistically Appropriate

National Standards for Culturally and Linguistically Appropriate Services (CLAS)

<https://thinkculturalhealth.hhs.gov/clas>

Cultural Competence & Cultural Humility

<https://ready.web.unc.edu/section-1-foundations/module-8/>

5 Tips for Creating Culturally Responsive and Sustaining Youth Programs

<https://steinhardt.nyu.edu/metrocenter/5-tips-creating-culturally-responsive-and-sustaining-youth-programs>

Equity, culture and identity

<https://extension.umn.edu/building-high-quality-youth-programs/equity-culture-and-identity>

Inclusivity

Understanding LGBTQ Youth & Ensuring Inclusivity in TPP Programs

<https://rhntc.org/resources/understanding-lgbtq-youth-ensuring-inclusivity-tpp-programs>

Support LGBTQ+ Clients with Affirming Language Job Aid

<https://rhntc.org/resources/support-lgbtq-clients-affirming-language-job-aid>

DEVELOPING LGBTQ-INCLUSIVE CLASSROOM RESOURCES

https://www.glsen.org/sites/default/files/2019-11/GLSEN_LGBTQ_Inclusive_Curriculum_Resource_2019_0.pdf

LGBTQ Inclusivity in Schools: A Self-Assessment Tool

https://www.cdc.gov/healthyouth/disparities/mai/pdf/LGBTQ_Inclusivity-508.pdf

Trauma-Informed

Creating Safe, Collaborative, and Empowering Environments Team Meeting Package

<https://rhntc.org/resources/creating-safe-collaborative-and-empowering-environments-team-meeting-package>

A Checklist for Integrating a Trauma-Informed Approach into TPP Programs
<https://rhntc.org/resources/checklist-integrating-trauma-informed-approach-tpp-programs>

Medical Accuracy

Sexual and Reproductive Health - Medical Accuracy Review Checklist (*coming soon!*)

Introduction to Reproductive Anatomy and Physiology eLearning
<https://rhntc.org/resources/introduction-reproductive-anatomy-and-physiology-elearning>

**Note that this is a list of some, but not all, resources that may be available on medical accuracy, age appropriate, culturally and linguistically appropriate, trauma-informed, and inclusivity. OPA does not endorse any of the resources listed other than those developed by OPA.*

Appendix C: Definitions of Terms

Age appropriateness - Ensures that topics, messages, and teaching methods are suitable to particular ages or age groups of children and adolescents, based on developing cognitive, emotional, and behavioral capacity typical for the age or age group. An age-appropriate program addresses students' needs, interests, concerns, developmental and emotional maturity levels, experiences, and current knowledge and skill levels. Learning is relevant and applicable to students' daily lives and concepts and skills are covered in a logical sequence.

Culturally and linguistically appropriate - Assures that materials and language used are respectful of and responsive to the cultural and linguistic needs of the population being served. This includes being respectful and responsive to individual cultural health beliefs and practices, preferred languages, health literacy levels, and communication needs.

Inclusivity - When all people, especially youth, are fully included, supported, and can actively participate in and benefit from the information they need to make healthy choices. This includes ensuring that program materials and practices do not alienate, exclude, or stigmatize individuals of diverse lived experiences and backgrounds, which includes but is not limited to, individuals who belong to underserved communities, such as Black, Latino, and Indigenous and Native American persons, Asian Americans and Pacific Islanders and other persons of color; members of religious minorities; lesbian, gay, bisexual, transgender, and queer (LGBTQ+) persons; persons with disabilities; persons who live in rural areas; and persons otherwise historically marginalized and adversely affected by persistent poverty or inequality.

Medical accuracy - Verified or supported by the weight of research conducted in compliance with accepted scientific methods; and published in peer-reviewed journals, where applicable or comprising information that leading professional organizations and agencies with relevant expertise in the field recognize as accurate, objective, and complete.

Trauma-informed approach - Refers to how a program, agency, organization, or community thinks about and responds to those who have experienced or may be at risk for experiencing trauma. It is an approach that: (1) realizes the widespread impact of trauma and potential paths for recovery; (2) recognizes the signs and symptoms of trauma in youth, families, staff, and others; (3) responds by fully integrating knowledge about trauma into policies, procedures, and practices; and (4) seeks to actively resist re-traumatization.