

Hi I'm Katie Adamek, a Senior Researcher at Mathematica. This video will provide you with a high-level overview of the Teen Pregnancy Prevention Evidence Review and discuss the steps taken for a study to be added to it. I'll be referring to the evidence review as the TPPER for brevity throughout the video.

First, let me tell you a little bit about the TPPER. The purpose of the TPPER is to identify programs with evidence of effectiveness in reducing teen pregnancy, sexually transmitted infections—or STIs—and associated sexual risk behaviors. Examples of the associated sexual risk behaviors are number of partners or contraceptive use during sexual activity.

The TPPER is funded by the U.S. Department of Health and Human Services, also known as HHS, and managed by the Assistant Secretary for Planning and Evaluation, also known as ASPE.

You might wonder how programs get included on the TPPER.

Since 2009, ASPE has contracted with Mathematica, an independent policy research organization, to conduct independent reviews of studies. These reviews are guided by a review protocol. The protocol outlines rules the review must follow and standards that studies must meet to be included on the TPPER.

Some people think that if a study is published in a peer-reviewed journal, it's sufficiently high-quality and the findings can be trusted. However, journal peer reviewers vary in terms of their training and what they are looking for in a study. They also don't use a specific protocol to assess the quality of a study and the peer-review process can vary across different journals.

In contrast, the TPPER review protocol ensures that independent reviewers examine potential threats to the credibility of the evidence so that only the most trustworthy findings emerge. This is also referred to as internal validity. For example, maybe too many people dropped out of the study, or maybe differences in data collection approaches across the groups call into question the credibility of the findings.

The TPPER review protocol ensures that all studies are assessed in a standard manner, so these types of issues are identified and accounted for when assessing the evidence.

The TPPER review process involves four steps:

- A search for studies
- Screening and selecting studies
- Assessing the quality of evidence of the individual studies and
- Determining the evidence of effectiveness of programs.

Now I'll walk through these steps to provide a little more detail on each.

First there is a search for studies that includes a public call for studies which OPA sends out through its grantee digest, grantee listserv, and the public OPA newsletter. If you have or know of a study to contribute, please send it in during the next call for studies.

The TPPER team also searches for studies through a keyword search of electronic databases, a scan of academic journals, and a review of reference lists of recently published literature reviews and meta-analyses. A meta-analysis is an analysis that looks across multiple studies).

Next, the review team screens and selects studies relative to a set of inclusion or eligibility criteria. These criteria include:

- That the study was conducted in the US with youth who are an average age of 19 or younger;
- That it focused on a program intended to reduce teen pregnancy, STIs, or associated sexual risk behaviors;
- That it used a design that can produce evidence of program effect or behavior change, meaning it was a study with a comparison group;
- And the evidence is sufficiently timely. Currently, data collection must have been completed within the last 20 years, but the protocol will likely change to 15 years in the future to make sure that TPPER is looking at research relevant to the current context with social media, current teen pregnancy rates, etc.

Finally, the study must have measured impacts, or changes in behavior, on at least one sexual risk behavior. For example, sexual activity, or ever had sex, number of partners, or contraceptive use during recent sex. The study can also measure impacts on a consequence of sexual risk behavior, such as, teen pregnancy, birth or STIs.

Next, two independent reviewers assess the quality of the evidence for each study using the protocol I mentioned before. Studies are rated as high, moderate, or low quality based on the study design. This rating assesses the risk of bias in the study's findings, in other words how much we can trust that the results of the study are credible or believable.

The rating also assesses whether the observed difference in participant outcomes (for example a change in sexual behavior) is only due to the program being tested, not other factors such as gender or the type of school the youth are attending.

For example, a randomized controlled trial (which is study that randomly assigns study participants into groups that can be compared) would be rated as high if it had no known issues with the study design.

A quasi-experimental design (which is a study that has a comparison group but did not randomly assign the study participants to the groups) would be rated as moderate. And a study that used a simple pre-post test with no comparison group would be rated as low, since without the comparison group it isn't possible to attribute a change in behavior just to the program itself. Studies that are rated low won't be used by the TPPER as evidence of program effectiveness.

Finally, two independent reviewers assess whether the study has statistically significant effects on the outcomes of interest.

In other words, for a program to be added to the TPPER a study has to find that the program changed at least one sexual behavior outcome in a favorable direction (such as decreasing sexual activity or increasing contraceptive use during sexual activity) and that change needs to be unlikely to be explained solely by chance.

It also can not have had an outcome with unfavorable effects, for example, decreasing condom use or increasing STIs.

I should mention that if the reviewers have any questions about the study during the full review process, they'll reach out to the study authors to gather more information before deciding about the study quality or evidence of effectiveness.

Programs that have evidence of effectiveness on at least one sexual behavior outcome or consequence outcome are added to the TPPER list of evidence-based programs.

Once a program is added to the list the team develops a program profile that provides a summary of the program and how it's implemented. This profile is then reviewed by the program developer or distributor for accuracy.

Once the program profile is finalized it's added to the TPPER website with the accompanying information on the reviewed study or studies. The link to the website is youth.gov/evidence-innovation/tpper. This website also has a section called "about the review process" that includes the current version of the protocol and all past versions if you want more details on the TPPER review process.

If you're interested in learning how to navigate the TPPER website, there's another video in this series titled, "Using the Teen Pregnancy prevention Review Website" that I encourage you to watch.

If you want more information about the TPPER review, there is a research brief available on the Reproductive Health National Training Center, or RHNTC, website that provides an overview of the review process and research standards. Just search for "teen pregnancy prevention evidence review" on the RHNTC site and it should pop up.

OPA grant recipients who have questions about the TPPER or selecting or evaluating an evidence-based program should reach out to their OPA project officer, the Mathematica Evaluation TA team, or their RHNTC TA liaison.

Anyone else with a question about the TPPER should reach out to Mathematica at TPPER@Mathematica-mpr.com.

Thank you very much!