

Symposium of the Office of Populations  
Affairs, Office of Adolescent  
Pregnancy Programs and Other Partners  
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**Promoting What Works: Supporting Pregnant  
and Parenting Adolescents**  
*Gaps, Challenges, and Opportunities for Action:*  
*Research Perspective*

**Deborah Koniak-Griffin, RN, EdD, FAAN**  
Professor and Audrienne H. Moseley Endowed Chair, Women's  
Health Research  
Director, Center for Vulnerable Populations Research  
UCLA School of Nursing  
dkoniak@ucla.edu



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**Research Perspective: Introductory  
Remarks**

- Promoting successful programs to develop evidence-based practice (EBP)
  - Systematic and well-planned process
    - Deliberate in nature, involving series of steps
    - Proceeding from qualitative/formative → to pilot studies → RCT → Replication trials ([Dissemination Research](#)) (Olds, Sadler, & Kitzman, 2009)
  - = **Translation Research Model**
- Conducting program evaluations is an essential activity for promoting EBP
  - Many promising interventions are not appropriately evaluated
- Decide on questions to be addressed and then determine the data needed to answer the questions

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**Introductory Remarks - *continued***

- Evaluation data helps us
  - learn about the implementation process and outcomes (knowledge development)
  - refine and improve interventions
  - develop larger clinical trials that are necessary for building EBP
- Collect data *prior* to start of program, during and at *completion* (pretest/posttest comparison); follow-up
  - Recruitment – # of refusals + reasons, enrollment
  - Process/implementation e.g., attendance, # of hours involved, reactions to activities, reason for dropping out
  - Outcome – e.g., knowledge, parenting skills, self-care behavior, health care utilization, educational achievement, beliefs/attitudes
  - Impact – e.g., How do skills, behavior and knowledge change by participating in program? satisfaction ratings; [cost-benefit data](#)

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## What We Know About Successful Parenting Prevention Programs

- Programs for teen parents vary in types of services provided, delivery site, and target population
  - No one EBP serves as a model
  - Prenatal period = "window of opportunity"
- Many studies involving adolescent mothers are pilot/feasibility or quasi-experimental
  - Evaluations often short-term
  - Outcomes measures vary across studies
- Sample size affects ability to draw meaningful conclusions
- Adolescent mixed in samples with vulnerable adult women
- Mixed findings about who should deliver intervention (paraprofessionals vs. skilled professionals)

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## Recommendations: Building the Science

- Replicating effective interventions may be most optimum and cost-effective approach (High Priority)
  - Reinventing the wheel should be avoided
  - Search the best evidence before planning new programs
  - Replication helps to determine if intervention works with different populations and in other settings, across developmental stages; whether family involvement improves outcomes
- Booster sessions to enhance program effects
- Consider CBPR approach – deliberate outreach, cultural tailoring; buy-in of community

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## Recommendations: *continued*

- New interventions – should have potential of high impact on maternal/child/family health and functioning (relevance to society)
  - Bi-directional collaboration - sharing of expertise and knowledge exchange - co-development or co-replication with practitioners and community members (increases likelihood that researcher will focus on problems of significance; accelerates application of new discoveries)

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## Tips for Success

- Randomize after consent in RCTs to avoid self-selection bias
  - Account for all participants (intention-to-treat)
- Foster participant retention
  - Develop interventions that adolescents will engage in
    - Developmentally appropriate, interactive, flexible
    - Services that participants believe can reduce their vulnerability (Olds, Sadler, Kitzman 2009)
  - Easily accessible
  - Provide incentives
  - Reminder phone calls
  - Locator guides
  - Graduation ceremony – certificate of completion



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## Tips for Success-continued

- Foster father involvement
  - Directly recruit young fathers
  - Flexibility in intervention delivery – work is a priority
- Evaluation
  - Carefully train and monitor the evaluators
  - Select outcomes with clear public health and social significance
  - Use multiple data sources - behavioral & objective
  - Examine facilitators and barriers to behavior change
- Consider alternatives to RCTs, if indicated
  - Similar comparison group from another site
  - Matched controls
  - Meta-analyses



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## Strategies for Promoting What Works: Specificity in Reporting

- **WHO** – Sample
  - Characteristics - age, ethnicity/race, urban/rural/homeless
  - Comparability of control and treatment groups
  - Retention/attrition – reasons for attrition
- **WHAT** - Treatment and Evaluation Methods
  - Intervention – What was provided
  - Focus – mother/father, child, grandparents
  - Fidelity – What did participants actually receive vs. intended?
  - Outcomes – What was evaluated?

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## Specificity in Reporting - *continued*

- **WHEN** – Timing of group assignment, intervention and evaluation ( $\geq 6$  months follow-up)
- **WHERE** – Intervention and evaluation site
- **HOW**
  - Group assignment – How was it determined?
  - Intervention – How was it delivered?
  - Interveners – How were they trained?
  - Evaluation - How were outcomes measured? *and* How effective was the program (results)?

### CONSORT Table

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## Opportunities: Identify and Address the Gaps

- Hard-to-research pregnant/parenting adolescents
  - Out-of-school; late entry/no prenatal care
  - Homeless and youth in foster care; substance users
  - Latino and American Indian young parents, immigrants
- Interventions delivered to couples and families
- Social-contextual-environmental factors influencing outcomes and translation e.g., co-residence with grandparents
- Effects of mediators on recruitment, retention, participant engagement in intervention
- Use of technology
  - Social networking, e.g., Text4Baby (womenshealth.gov)
- Strategies to reduce preterm birth/LBW rates - Group Prenatal Care
- Cost-benefit analysis

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## Final Remarks



Researchers and other professionals working with young parents need to commit to translation!

- Collect data needed to evaluate programs
  - Disseminate work to other professionals, the public, politicians
    - Social media is an under-used strategy
  - Identify the next steps in plans
- Consistent replication of evidence should form basis for policy development.

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