



**The Evaluation of Teen Outreach Program (TOP) Plus Text Message Enhancement (TOP4ME) in Denver**

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Intervention Name	Teen Outreach Program (TOP) Plus Text Message Enhancement (TOP4ME)
Intervention Description	<p>The intervention group receives TOP Plus Text Message Enhancement. TOP is a youth development and service learning program for youth ages 12 to 17 designed to reduce teenage pregnancy and increase school success by helping youth develop a positive self-image, life management skills, and realistic goals. The TOP program model consists of three components implemented in school, after school, or in community settings over nine months: (1) weekly curriculum sessions, and (3) positive adult guidance and support. The TOP Changing Scenes Curriculum is separated into four age/stage-appropriate levels, Level 1 is typically for youth age 12 to 13 and Level 4 is typically for youth age 17. The curriculum focuses on the presence of a consistent, caring adult, a supportive peer group, skill development, sexual health, and sexual behavior choices. The intended program dosage for each participant is a minimum of 25 weekly sessions (one per week at 40–50 minutes each) and at least 20 hours of community service learning over 9 months. One or two facilitators who plan the order of sessions based on the needs and interest of youth implemented TOP in a group of 10-25 youth.</p> <p>TOP programming is offered through after-school programs at Boys &amp; Girls Clubs. Club staff trained as TOP facilitators are providing Levels 3 and 4 (with a few lessons from Level 2) of the Changing Scenes Curriculum to youth ages 14 to 18.</p> <p>Youth in the intervention condition also receive text messages that reinforce specific topics covered each week in the TOP sessions and offer additional information and resources related to the topics TOP covers each week. When the TOP program is completed, text messages continue at the average rate of three per week for an additional 12 weeks.</p> <p>Text messages were developed after a formative evaluation using input from youth with characteristics similar to the program’s intended audience. Text messages are intended to help youth remember to attend TOP sessions. They also reinforce and supplement TOP content. Messages were developed with specific attention to improving self-efficacy, attitudes, intentions, and norms related to the primary behavioral outcomes of contraceptive and condom use. In addition, message development included attention to best practices in communications research related to design that can facilitate engagement with and maximize positive response to messages.</p>
Counterfactual	TOP without text messaging enhancement
Counterfactual Description	As described above, the TOP curriculum includes a required 25 educational peer sessions (each about 40 minutes in length) and a minimum of 20 service learning hours completed by each participant. These are designed to be delivered during an academic school year. Sessions typically occur once per week (with holiday breaks). TOP programming is offered through after-school programs at Boys & Girls Clubs. Because both the intervention and counterfactual conditions receive the TOP program, this evaluation tests the effect of the text messaging enhancement (in the context of TOP program implementation) in improving sexual health and education outcomes for youth.
Primary Research Question(s)	<p>What is TOP4ME’s impact, relative to TOP, on the proportion of sex acts protected by condoms or contraception at TOP program completion?</p> <p>What is TOP4ME’s impact, relative to TOP, on use of contraceptive and/or sexually transmitted disease (STD) clinical services at TOP program completion?</p>
Additional Outcomes	Ever being pregnant or causing pregnancy, psychosocial outcomes (social support, future aspirations, and self-efficacy), self-efficacy for contraceptive and condom use

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Sample	Eight of the 11 Boys & Girls Clubs of Metro Denver participated in the study. Boys & Girls Clubs are the unit of randomization, and clubs are randomly assigned to different conditions across each of the four study years. Eligible youth include those ages 14 to 18 who belong to one of the eight Boys & Girls Clubs in which the study is being implemented each year for four years. An average of 25 participants per club will be recruited each year; the total number of youth participants anticipated is 800. All eligible youth were invited to participate.
Setting	The Boys & Girls Clubs of Metro Denver are located in high-poverty communities where participants face disparities in accessing quality education, health care, and other social services.
Research Design	<p>This is a cluster randomized trial with random assignment of each combination of club and year. The random assignment for all eight clubs across the four years (that is, 32 club years in total) was conducted at the study's outset by a member of the evaluation staff at the University of Colorado Denver. All club years were randomized at the same time (for example, the Broncos Club is in the sample four times, once each year for four years; the club was randomized for each year at the study's outset), such that each club was assigned to the treatment group in two years and to the control group in two years.</p> <p>Before enrollment, each participant viewed a videotape that covered all required elements of informed consent and explained the assessments. Participants in the treatment group also viewed a short videotape explaining the text message program. To be part of the study, participants were obligated to indicate at the beginning of the baseline assessment that they viewed the video, understood it, and agreed to participate in the study. All assessments were self-administered via computerized surveys in club computer labs at enrollment in September, at the end of the TOP program, and 12 months after the youth have graduated from TOP.</p>
Impact Findings	To be determined when data collection and analysis are complete.
Implementation Findings	To be determined when data collection and analysis are complete.
Schedule/Time Line	Sample enrollment ends September 2014. Follow-up assessments end May 2015. A final report, which focuses on the immediate post test, will be available to the Office of Adolescent Health in 2015-2016.