



Performance Measures Snapshot

The Teen Pregnancy Prevention Program: Performance in Fiscal Year 2017 (Year 2)



The Teen Pregnancy Prevention (TPP) program is a competitive grant program administered by the Office of Adolescent Health (OAH) within the U.S. Department of Health and Human Services. The TPP program funds diverse organizations across the United States to implement evidence-based teen pregnancy prevention programs and to develop and evaluate new and innovative approaches to prevent teen pregnancy. It targets youth ages 10–19 and focuses on reaching populations with the greatest need, with a goal of reducing disparities in teen pregnancy and birth rates. For the 3-year period from July 1, 2015, to June 30, 2018, OAH is funding 84 grants.

The grants fall into five categories in two tiers:

Tier 1: Implementation of evidence-based programs

- *Tier 1A:* Eight grantees are working to increase the capacity of youth-serving organizations to implement and sustain evidence-based TPP programs.
- *Tier 1B:* Fifty grantees are using a holistic approach to implement evidence-based programs to scale in multiple settings to reach a large number of youth and communities in need. The approach includes mobilizing community support; engaging youth and families; providing linkages to youth-friendly health services; and creating safe, supportive environments for youth.

Tier 2: Development and testing of innovative approaches

- *Tier 2A:* Two grantees are supporting innovative approaches to teen pregnancy prevention that are promising but not yet ready for evaluation.

- *Tier 2B:* Twenty-one grantees are rigorously evaluating innovative approaches that address gaps in the TPP evidence base.
- *Tier 2C:* Through a partnership between OAH and the Centers for Disease Control and Prevention, three grantees are evaluating programs designed to reduce young men's risk of fathering a teen pregnancy.

More detailed information about the TPP program is provided at http://www.hhs.gov/ash/oah/oah-initiatives/tpp_program/.

To assess TPP program performance, OAH requires all grantees to collect performance measure data and report on the data twice a year. The performance measure data serve several purposes. These data provide OAH with regular updates about the performance of individual grantees and the TPP program overall, including the number and types of people served, the quality of the program implementation, and the dissemination of program results. OAH uses the measures to report the program's progress in achieving its set goals and to understand program performance, and grantees use them to assess and improve their program operations.

This brief summarizes performance measure data from the second grant year (FY2017) excluding Tier 2C grantees, which report on a different timeline.

PERFORMANCE MEASURE HIGHLIGHTS Fiscal Year 2017

- 213,420 participants were served
- 84% of participants attended $\geq 75\%$ of scheduled sessions
- Facilitators implemented 92% of planned activities
- 83% of sessions were rated as high quality
- Grantees worked with 3,665 partners and trained 3,675 new facilitators

OCTOBER 2017

TPP Performance Measures and Definitions

The performance measures presented in this report and their definitions are shown below.

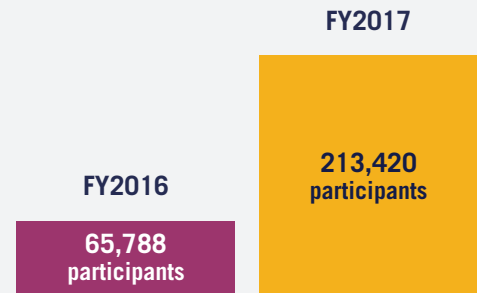
Measure	Definition
Reach	The number of participants enrolled in the program who attended at least one program activity during the reporting period, broken down by specific characteristics
Dosage	—
Mean attendance	The average percentage of curriculum-based sessions attended by program participants*
Participants receiving 75% or more of the program	The percentage of program participants who attended 75% or more of the curriculum-based program sessions*
Fidelity and Quality	—
Observer-reported adherence	The average percentage of required program activities that facilitators completed during observed program sessions, as reported by independent observers
Observer-reported overall quality	The percentage of observed sessions that independent observers rated 4 or higher on a 5-point scale for quality
Training	—
Number of new facilitators trained	The number of new facilitators trained
Number of facilitators receiving follow-up training	The number of facilitators who received additional or follow-up training
Partners	—
Number of formal partners	The number of partners that grantees worked with through formal agreements
Number of informal partners	The number of partners that grantees worked with without formal agreements
Dissemination	—
Newspaper or magazine articles	The number of newspaper or magazine articles published
Presentations	The number of presentations at the national, state, and local levels

* Some program models included components that were not curriculum based, such as community service or case management; these components were not included in the dosage measures.

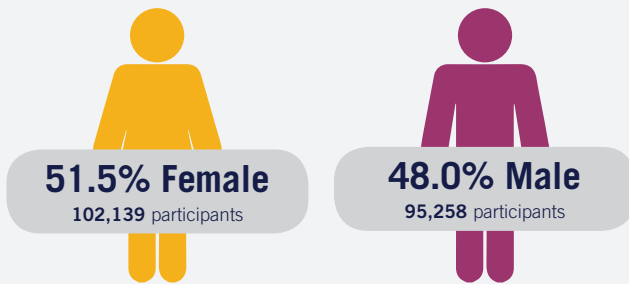
Number of participants reached

The number of participants engaged in the program is a key indicator of overall impact.

Grantees reached 213,420 participants in FY2017, nearly three times as many as in FY2016. In FY2016, grantees were piloting their programs, and only 69 reported having served any participants. FY2017 was the first year of full program implementation, and all 79 grantees in Tiers 1A, 1B, and 2B reported having served participants.



Characteristics of program participants



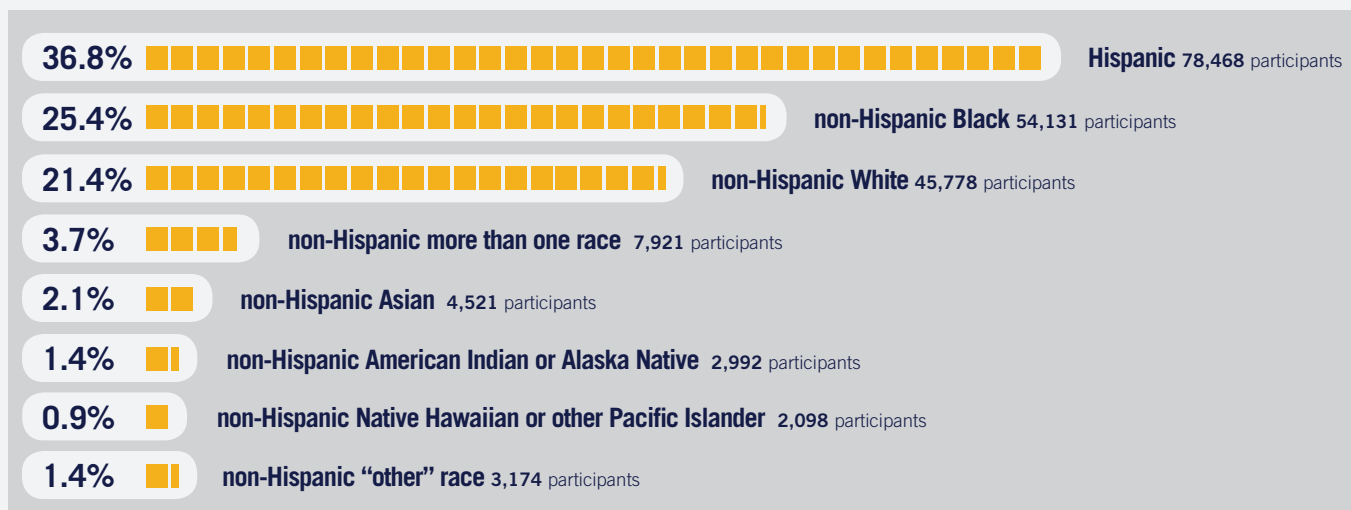
GENDER

The program served nearly equal proportions of males and females. Just over half (51.5%) of participants identified as female, and 48.0% identified as male.

RACE/ETHNICITY

Slightly more than one third (36.8%) of participants identified as being Hispanic. Most of the remaining participants were non-Hispanic Black (25.4%), or non-Hispanic White (21.4%). The remaining 16.4%

were non-Hispanics of other races (Asian, American Indian or Alaska Native, Native Hawaiian or other Pacific Islander, more than one race, or “other” race).*

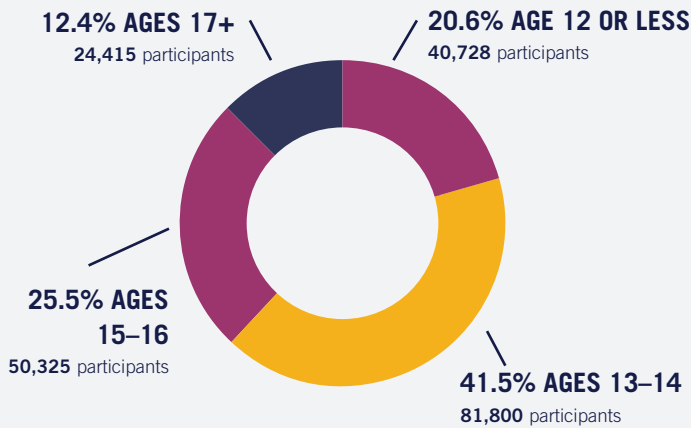


* The non-Hispanic categories include participants who did not report their ethnicity but did report their race. Participants who reported neither race nor ethnicity are not included in the totals.

Characteristics of program participants

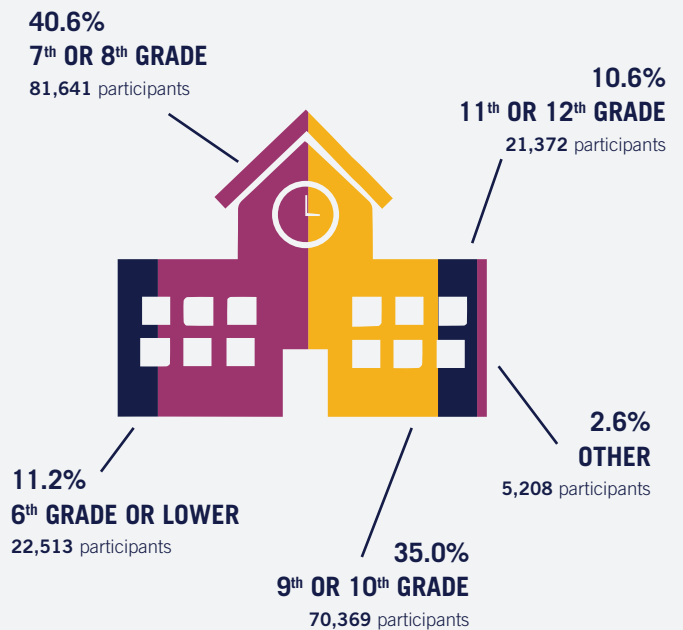
AGE

Nearly two-thirds of participants were age 14 or younger: 41.5% ages 13-14, and 20.6% age 12 or younger. One fourth (25.5%) were ages 15-16, and 12.4% were age 17 or older.



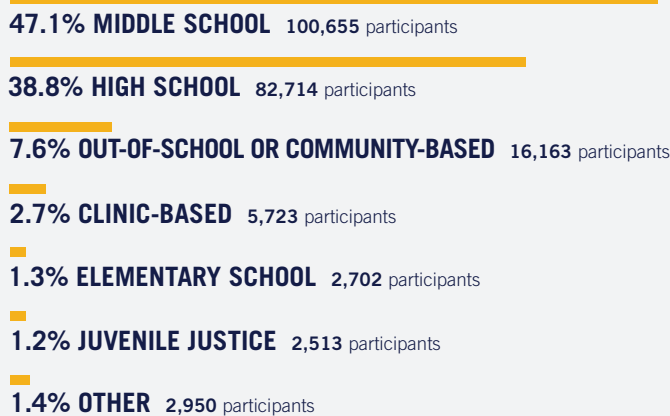
GRADE

Three fourths of participants were either in 7th or 8th grade (40.6%) or 9th or 10th grade (35.0%). An additional 11.2% of participants were in 6th grade or lower, and 10.6% were in 11th or 12th grade. The remaining 2.6% were in general education development (GED) programs, college or technical schools, or not in school.



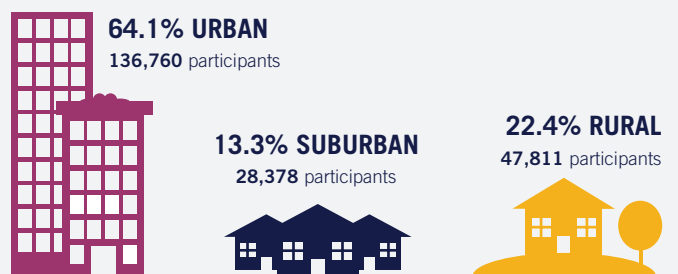
SETTING

The large majority of participants were in either middle school settings (47.1%) or high school settings (38.8%). An additional 7.6% were in out-of-school or community-based settings, 2.7% in clinic-based settings, 1.3% in elementary school settings, and 1.2% in juvenile justice settings. For all other settings, the proportion of participants served was less than 1%.



URBANICITY

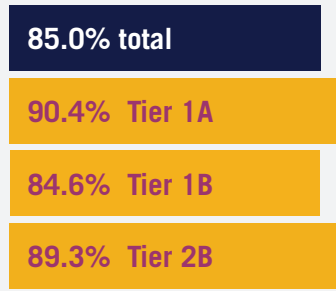
Most participants (64.1%) were in urban areas, 22.4% were in rural areas, and 13.3% were in suburban areas.



Dosage

Dosage is a measure of the amount of the program that participants received. The more of a program that a participant receives, the greater its potential impact.

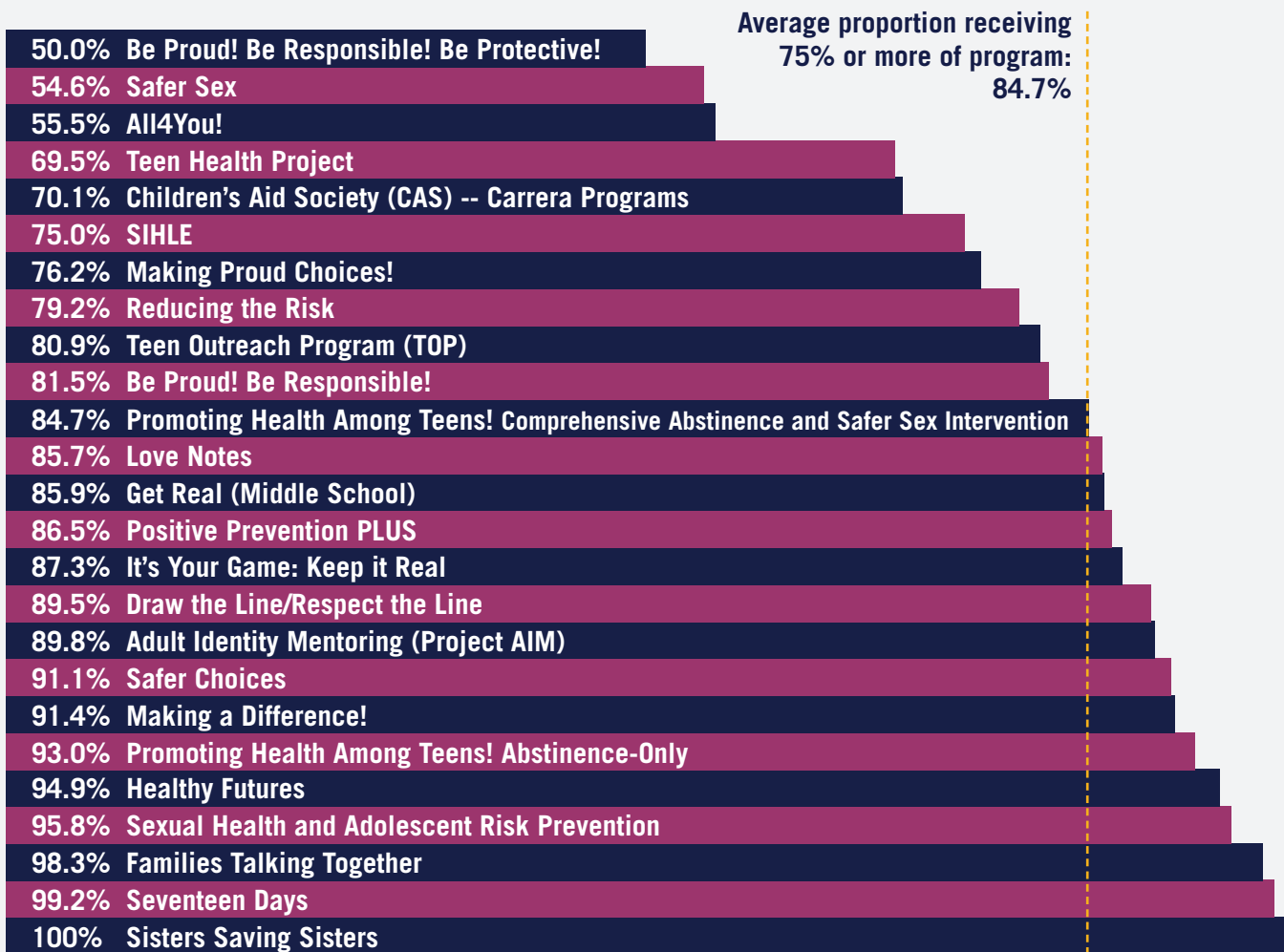
Average dosage was high. Seventy-nine grantees reported dosage data in FY2017, and 84.9% of participants received at least 75% of their program model's sessions. Dosage was slightly lower for Tier 1B (84.6% received at least 75% of sessions) than it was for Tier 1A (90.4%) or Tier 2B (89.3%).



DOSAGE BY TIER 1 PROGRAM MODEL

Tier 1 grantees are each implementing one or more evidence-based program models. In FY2017, all 58 Tier 1 grantees reported dosage data for 25 different program models.

Dosage varied significantly by program model. In FY2017, 84.7% of participants received 75% or more of intended programming. Dosage ranged from a low of 50.0% for Be Proud! Be Responsible! Be Protective! to a high of 100% for Sisters Saving Sisters.



Fidelity and quality of program implementation

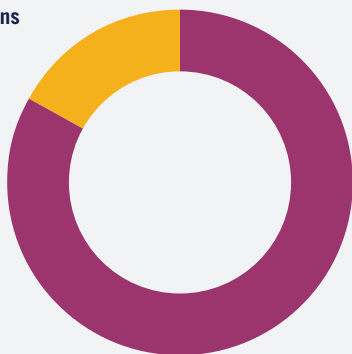
Fidelity can be defined as “the extent to which delivery of an intervention adheres to the protocol or program model as originally developed.” Measuring the fidelity and quality of program implementation helps project managers identify any problems in program implementation and then act to correct them. These measures also assist in the interpretation of evaluation results. If a grantee’s project fails to achieve the intended results, it is important to know whether the lack of success might be due to a lack of fidelity or quality in implementation. To assess fidelity and quality, grantees assign an independent observer to assess at least 5–10% of program sessions.

OBSERVER-REPORTED QUALITY

To assess the quality of the programs provided, observers complete a form rating facilitators on a variety of factors (e.g., time management, enthusiasm, clarity of explanations) and their overall performance (a measure of overall quality that takes into account all the specific factors assessed). Ratings were on a scale of 1 (poor) to 5 (excellent). In FY2017, 75 grantees reported data on quality.

Quality of implementation was high for most sessions observed. Independent observers rated 83.2% of observed sessions as rated as having an overall quality of 4 or higher on a 5-point scale.

83.2%
OBSERVER-REPORTED QUALITY
N=5,721 sessions



% of observed sessions rated as having an overall quality of 4 or higher on a 5-point scale

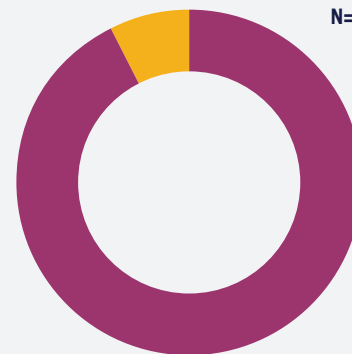
OBSERVER-REPORTED FIDELITY

To implement a program model with fidelity, grantees must carry out all of its core components. Core components are the parts of the program model that the developers have identified as key to achieving the intended outcomes. One core component that is common to nearly all of the program models is the percentage of planned activities that facilitators implement. Independent observers completed a fidelity monitoring log at the end of each session observed, indicating which planned activities were completed and which were not. In FY2017, 77 grantees reported data on fidelity.

During the sessions observed, facilitators implemented nearly all planned activities.

Independent observers reported that facilitators implemented 92.7% of the expected activities.

92.7%
OBSERVER-REPORTED FIDELITY
N=6,692 sessions



% of planned activities implemented during observed sessions

Facilitator training

Training program facilitators is key to the quality and fidelity of program implementation. Training also builds lasting capacity within schools, community-based organizations, clinics, and other settings where facilitators are based.

In FY2017, all 81 grantees reported training data. *They trained 3,675 new facilitators and provided follow-up or supplemental trainings to 3,372 facilitators.**

*Supplemental trainings include training on any topic that will improve the facilitators' delivery of the program.



Grantee partners

Partners are organizations that work with the grantees to support their programs; some partners have formal agreements with the grantees while others do not. The number of partners engaged by TPP grantees suggests the level of community engagement around the topic of teen pregnancy prevention and indicates the

potential for sustainability of the programs after the grant cycle concludes.

Seventy-nine grantees reported on the number of partners they had during of FY2017. *These grantees reported a total 3,665 partners, including 1,546 formal partners and 2,119 informal partners.*



Dissemination

OAH is committed to sharing the lessons learned from the TPP program with key stakeholders, including communities, organizations working to prevent teen pregnancy, and researchers.

In FY2017, the 81 grantees had 9 academic manuscripts accepted for publication (8 published and 1 in press), published 152 newspaper or magazine articles, and made 3,353 presentations. Most (88%) of the presentations were at local meetings or events.



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For further information, visit the
Office of Adolescent Health website:
<http://www.hhs.gov/ash/oah/oah-initiatives/for-grantees/performance-measures/>

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