

HHS Teen Pregnancy Prevention (TPP) Evidence Review
TPPEvidenceReview.aspe.hhs.gov

Call for Studies

SUBMISSION DEADLINE: NOVEMBER 30, 2016

Mathematica Policy Research seeks studies for a systematic review of the evidence base on programs that impact teen pregnancy, sexually transmitted infections (STIs), and associated sexual risk behaviors. The Teen Pregnancy Prevention (TPP) Evidence Review is being conducted for the Office of the Assistant Secretary for Planning and Evaluation (ASPE), the Administration on Children, Youth and Families (ACYF), and the Office of Adolescent Health (OAH) within the U.S. Department of Health and Human Services (HHS). Submissions are due by November 30, 2016.

BACKGROUND

High rates of teen pregnancy, STIs, and associated sexual risk behaviors remain a troubling issue in the United States. Nationwide, 41.2 percent of high school students report ever having had sexual intercourse, 12 percent report having had four or more partners by graduation, and 43 percent of sexually active students did not use a condom during their last sexual intercourse.¹ These behaviors increase the risks of pregnancy and STIs, including HIV. Although the teen birth rate has dropped significantly over the past 20 years, to a current low of 22.3 births per 1,000 females aged 15 to 19,² the rate remains higher in the United States than in most other industrialized countries.³ It is estimated that adolescents and young adults account for half of all new STI cases in the United States every year,⁴ and that one in four sexually active adolescent females have an STI.⁵

To help identify programs with evidence of effectiveness in reducing these risks, since 2009, HHS has sponsored an independent systematic review of the teen pregnancy prevention research literature. To date, the review team has identified and assessed over 250 program impact studies. From these assessments, the team has identified 44 programs with evidence of effectiveness in reducing teen pregnancy, STIs, or associated sexual risk behaviors. Findings from the review are posted publicly on an HHS website (TPPEvidenceReview.aspe.hhs.gov). The review findings are also one of several

¹ Centers for Disease Control and Prevention. Youth Risk Behavior Surveillance—United States, 2015. *MMWR*, vol. 65, no. 6, 2016, pp. 1–174.

² Hamilton, Brady E., Joyce A. Martin, and Michelle J.K. Osterman. “Births: Preliminary Data for 2015.” *National Vital Statistics Reports*, vol. 65, no. 3, 2016, pp. 1-14.

³ United Nations. “2014 Demographic Yearbook.” New York: United Nations, 2015.

⁴ Centers for Disease Control and Prevention. “Sexually Transmitted Disease Surveillance 2014.” Atlanta, GA: U.S. Department of Health and Human Services, 2015.

⁵ Forhan, Sarah E., Gottlieb, S. L., Sternberg, M. R., Xu, F., Datta, S. D., McQuillan, G. M., Berman, S. M., and Markowitz, L. E. “Prevalence of sexually transmitted infections among female adolescents aged 14 to 19 in the United States.” *Pediatrics*, 124(6), 2009, pp. 1505-1512.

resources available to teen pregnancy prevention practitioners and researchers through ACYF (<http://www.acf.hhs.gov/programs/fysb/resource/tpp-trainer-database>) and OAH (www.hhs.gov/ash/oah).

PURPOSE

This call for studies begins another round of reviews and an additional update to the review findings. The purpose of this update is to identify newly published or unpublished manuscripts not previously reviewed, particularly those released since August 2015, the cutoff for the last review update. New manuscripts will be identified through a literature search and a public call for studies. For a list of studies previously reviewed, search the study database available on the TPP Evidence Review website (<http://tppevidencereview.aspe.hhs.gov/StudyDatabase.aspx>).

Findings from this new update will be made publicly available on the TPP Evidence Review website. These findings will serve as a general update to the field on the state of the evidence and will not necessarily be tied to federal funding or any particular federal grant announcement. Funding decisions are made separately by federal program offices in accordance with their legislative authority.

The review will follow the same protocol used for the last round of reviews (http://tppevidencereview.aspe.hhs.gov/pdfs/TPPER_Review%20Protocol_v5.pdf). Studies submitted in response to this call should:

- **Examine the impacts of an intervention using quantitative data, statistical analysis, and hypothesis testing.** Interventions may focus on a range of approaches to reducing teen pregnancy, STIs, or associated risk behaviors, such as encouraging teens to wait to have sex, providing information on contraception, teaching refusal skills, or discussing the health consequences of sexual activity.
- **Measure program impacts on at least one measure of pregnancy, birth, STIs, or sexual risk behaviors.**
- **Focus on U. S. youth ages 19 or younger at the start of a program.**
- **Provide a detailed description of the intervention being evaluated, study design, analysis methods, and findings.** Paper abstracts, slide show presentations, and other informal study descriptions generally do not provide sufficient information and therefore will not be considered for review.
- **Be accessible to the public through a website, as a published journal article or book chapter, or upon request from the study author.** Mathematica will not publicly distribute or publish the studies received through this call. However, to ensure transparency in the review process, any study considered for review must be available to the public. Authors should not submit confidential manuscripts or evidence that is not otherwise publicly available.

SUBMISSION INSTRUCTIONS

Submissions should be emailed in MS Word or PDF format to:

PPRER@mathematica-mpr.com

The deadline for submissions is November 30, 2016.

Authors will receive acknowledgement of receipt of their submission.