

Evaluation of the Teen Outreach Program in Hennepin County, MN

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Evaluator	Abt Associates Evaluation Lead: Kim Francis, Kimberly_Francis@abtassoc.com
Intervention Name	Teen Outreach Program® (TOP®)
Intervention Description	<p>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 consecutive months: (1) weekly curriculum sessions, (2) community service learning (CSL), and (3) positive adult guidance and support. The TOP® <i>Changing Scenes</i>® curriculum is separated into four age- and stage-appropriate levels, which range from Level 1, typically for youth ages 12 or 13, to Level 4, typically for youth age 17.</p> <p>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 CSL over a nine month period. One or two facilitators implement TOP®, generally in groups of 10 to 25 participants, and select and order the lessons based on the needs and interests of the group. Lessons can be repeated, not selected, take place over more than one session, and more than one lesson can be implemented in a session. There is no fidelity requirement to implement sexual health-related lessons.</p> <p>For this evaluation, lessons from Levels 1–4 of the program were delivered to seventh to tenth graders via a co-facilitation approach, using both the classroom teacher and a staff member provided by a local community-based organization. Across Levels 1 - 4, facilitator pairs had 140 lessons from which to choose. Consistent with the program model, there was no standardization of lessons across the implementation. All program facilitators, including classroom teachers, received a 19-hour curriculum training by a certified TOP® replication partner. The program was implemented in different types of classes, such as social studies or health, to groups smaller than 10 and larger than 25 participants.</p>
Counterfactual	Business as usual.
Counterfactual Description	Study participants scheduled into control teachers’ classes received the “business as usual” counterfactual. That is, control teachers were not trained in the TOP® curriculum and taught their classes as they normally would. These classes varied across schools and included core subjects, such as social studies, and noncore subjects, such as study hall/advisory and health. Participating schools varied in terms of the standard sexual health or pregnancy prevention resources they offered students. Most had health classes with a sex-education component and/or guest presenters speaking about sexual health topics throughout the school year. One school had an on-site health clinic.

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Primary Research Question(s)	What is the average impact of TOP [®] , relative to the control group, on engagement in recent sexual activity three months after the program ends for the treatment group? ¹
Additional Outcomes	Engagement in unprotected sex, delayed initiation of sexual activity, school performance (self-reported course failure and school suspension), school engagement and attachment, educational expectations, self-efficacy (general), self-efficacy (civic), and civic responsibility.
Sample	The analytic sample used to answer the primary research question consisted of 1,223 youth from 24 middle and high schools in Hennepin County, Minnesota, including alternative and public charter schools. Students were enrolled in either school year 2011–2012 (Cohort 1) or 2012–2013 (Cohort 2). The target group was students in grades seven through ten (generally 12–16 years old). Participation in the study sample was contingent on the schools' willingness to participate and the availability of (1) a school-year-long class that met with the same student cohort throughout the school year and (2) a class period of sufficient length to complete a lesson from TOP [®] 's <i>Changing Scenes</i> [®] curriculum each week. Eligibility criteria for students were: (1) enrollment in a randomly assigned teacher's class at the time of the baseline survey, (2) parent/guardian written consent, (3) written participant assent, (4) ability to move, unassisted, through the baseline survey in English or Spanish, and (5) for Cohort 2, no prior participation in TOP [®] .
Setting	TOP [®] was delivered in middle schools, high schools, alternative schools, and public charter schools in Hennepin County. It was implemented during school hours in classes that span an entire school year with the same cohort of students. The subject of the class in which TOP [®] was placed differed across schools (for example, social studies, study hall, health), but within each school, TOP [®] was offered in only one class subject. ²
Research Design	<p>This is a cluster randomized controlled trial. Teachers were randomized within schools to the treatment and control conditions before the school year started to enable the treatment teachers to complete the curriculum training. Notification of random assignment occurred after students were scheduled into the study teachers' classes and the consent and baseline survey processes were complete. Students were scheduled into classes according to regular school procedures without parents, students, or scheduling staff knowing the teachers' study group status.</p> <p>All eligible students were required to obtain active written parent/guardian consent to participate in the study. The same consent process was used across treatment and control teachers' classes, including the same "blinded" parent/guardian consent form. By providing written consent, the parents acknowledged that their children might or might not be offered the TOP[®] program. In all cases, scheduling staff, students, and parents were unaware of the teachers' study group status until after the baseline surveys were completed. Since TOP[®] is part of the regular school curriculum, schools do not require parent permission for students to participate in TOP[®] programming, and there is no way for parents to opt their children out of any class, other than via state law.</p> <p>To assess the impact of offering TOP[®], students were surveyed three times: at</p>

¹ There is no equivalent of "program end" for the control group or for treatment group members who leave the program. Follow-up surveys were administered to both groups 12 and 24 months after enrollment in the study.

² One school offered TOP[®] in two class subjects, with each subject offered at a different grade level.

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	baseline, before the intervention began for the treatment group; three months post-programming (short-term impacts); and 15 months post-programming (long-term impacts). Baseline data and subsequent follow-up data were collected using a Web-based survey. Paper surveys were used as back-up for baseline data collection. The pooled survey data from both cohorts (school years 2011–2012 and 2012–2013) were used to estimate program impacts using an intent-to-treat (ITT) analysis. Program fidelity and interview data were used to describe program implementation.
Impact Findings	There was no evidence that TOP [®] impacted the primary outcome, engaging in recent sexual activity at the short-term follow-up. No impacts were detected for any of the additional outcomes.
Implementation Findings	Program staff offered a median of 29 weekly sessions. Treatment group members attended a median of 27 weekly sessions and completed a median of 18 CSL hours. However, just 39 percent completed the minimum 20 hours of CSL, and 35 percent completed both 25 weekly sessions and 20 hours of CSL. The majority of students responding to the short-term follow-up survey reported high-quality staff interactions and engagement with the program. Over half of the control group reported receiving information about several sexual health topics at school, and 41 percent had participated in community service in the prior 12 months. Eight schools with control group members provided a school-wide community service or service learning opportunity unrelated to TOP. There were no external events affecting implementation; one unplanned adaptation was granted to shorten the duration of the program from nine months to eight months where necessary to accommodate parent consent and baseline survey processes.
Schedule/Timeline	Sample enrollment ended October 2012. The three-month post-program follow-up data collection ended November 2013, and the 15-month post-program follow-up data collection ended November 2014.