

Materials Review Guidance

TEEN PREGNANCY PREVENTION PROGRAM - TIER 1

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Contents

INTRODUCTION	1
WHY CONDUCT MATERIALS REVIEW?	2
HOW TO CONDUCT YOUR REVIEWS?	2
APPENDIX A: SAMPLE MATERIALS REVIEW FORM	4
APPENDIX B: HELPFUL RESOURCES	8
APPENDIX C: DEFINITIONS OF TERMS	10

Introduction

The Office of Population Affairs (OPA) expects recipients to ensure that materials and information disseminated through their project is responsive to the needs of and appropriate for the community and population of focus. Teen Pregnancy Prevention (TPP) Program Tier 1 recipients and their implementation partners **must ensure** all materials used and information disseminated within the funded project **age appropriate** and **medically accurate**. OPA also expects recipients to make materials and information **culturally and linguistically appropriate**, **trauma-informed**, and **inclusive** of all youth (see Appendix C for definitions of terms). Materials and information covered by this expectation include, but are not limited to:

- Materials associated with EBPs (e.g., facilitator manual, scripts, participant booklet, videos, etc.)
- Supplemental materials and information associated with EBPs (e.g., pamphlets, handouts, facilitators' answers to participant questions, etc.)
- Materials and information used, shared, and disseminated with participants and/or the community (e.g., web content, social media posts, podcasts, presentations, newsletters, posters, etc.)

Recipients are expected to inform OPA of their review process, findings, and plans to address any issues identified. Recipients should ensure subject-matter experts are a key part of the review process. Recipients are responsible for making necessary changes prior to implementation. Any change proposed to an EBP must be reviewed and approved by OPA. Recipients may not begin implementation of EBPs or use and disseminate materials without prior approval.

Recipients should regularly conduct their materials review process, at least annually, to ensure that materials and information shared with the community and population of focus remain age appropriate, medically accurate, culturally and linguistically appropriate, trauma-informed, and inclusive. Recipients may make additional changes to materials, as needed, to meet the expectations of this opportunity; however, OPA must review and approve any changes prior to use.

Note that OPA may require recipients to submit their program materials for a medical accuracy review. Recipients will be notified if such a review is needed/required.

This guidance is intended to provide a clear understanding of what the expectation is related to materials review, why it's important, and how to demonstrate to OPA that the expectation is being met. An

important note is that you will see the word "materials" used throughout, sometimes in conjunction with the word "information" and sometimes on its own. References to "materials" always includes any information, whether on paper, virtual, or verbal that is shared with the community and population of focus and related to your project.

To view the webinar that was conducted providing an overview of Materials Review, please visit the recording link and slides.

Why Conduct Materials Review?

It is critically important that the information shared with youth, with their families, and with the community is age appropriate, medically accurate, culturally and linguistically appropriate, trauma informed, and inclusive of all youth. Not only does conducting a materials review help ensure that the programs we are delivering are appropriate, relevant, and a "good fit" for the community and population of focus, it also serves as the foundation for the credibility and reputation of an organization in a community. More so, it is the right thing to do and what youth deserve. For public health efforts to be effective and to truly advance equity in adolescent health, young people must be able to trust the adults sharing information and resources. False and/or misleading information can spread, leading to known and unknown harms in the context of public health and health equity. Harm can include reinforcing stigma and fear, promoting negative behavior, and/or diminishing the importance of making informed, healthy decisions.

How to Conduct Your Reviews?

There are different ways to conduct your material reviews. You and your project team will have to decide the process that will work best for your project. Regardless of the method selected, OPA has a few expectations and recommendations.

OPA Material Review Expectations

- Develop a process for materials review and detail the process in your work plan. Include who is
 responsible for managing the review and what individuals will be involved in the actual review of
 materials and content (i.e., subject matter experts), when and how often materials will be
 reviewed, and how information will be relayed to the project team (including implementers) and
 OPA.
- Review all materials used and information shared in the funded project to ensure that they are medically accurate, age appropriate, culturally and linguistically appropriate, trauma-informed, and inclusive.
- Document changes needed and made as a result of the review. You should make any necessary
 modifications to ensure materials are culturally appropriate, age appropriate, medically accurate,
 and trauma-informed. Oftentimes such necessary modifications would be considered *minor*adaptations and would not require OPA approval to implement. However,
 - Discuss all modifications with your OPA Project Officer. Your PO will serve as the final resource in determining whether an adaptation is minor or major in order to assist you in properly documenting the adaptation. All major adaptations require approval from OPA prior to being implemented. See Appendix C for definitions of major vs. minor adaptations.
- Report on materials review process and progress in your semi-annual progress report.
- Verify through the required implementation plans that program materials associated with that implementation plan have been reviewed for medical accuracy and issues have been addressed.

 Conduct material reviews on a continuous basis as part of your standard monitoring and improvement process. Be sure to report on the process and any updates made in the semiannual progress report.

OPA Material Review Recommendations

- Identify what expertise/perspectives should be reflected as part of this review and have multiple
 individuals with relevant experience and expertise review materials. Don't forget to include
 individuals representing the population of focus (i.e., youth) as well as key stakeholders (e.g.,
 parents/caregivers).
 - For medical accuracy reviews, select individuals with medical or health education backgrounds/credentials (e.g., physicians, nurse practitioners, registered nurses, adolescent health education specialists, reproductive health specialists, public health specialists).
 - For age appropriateness, cultural and linguistic appropriateness, and inclusivity, the
 review should be focused specifically on the population served by your funded project
 and should involve individuals with experience working with and/or from your population
 of focus (e.g., youth, teachers, implementers, education/curricula specialists,
 parents/caregivers, etc.).
 - For trauma-informed, the review should include individuals with experience and expertise in trauma-informed approaches (e.g., counselors, social workers, licensed mental health workers, etc.).
- Identify who in your organization may be qualified and have the capacity (i.e., time) to review materials for the various items identified in the expectation age appropriate, medically accurate, culturally and linguistically appropriate, trauma informed, and inclusive.
- Identify what expertise is missing and needed as part of this review. Determine how you will fill this need. For example, will you contract with experts in the field? Will you leverage partner staff who can fill this expertise?
- Ensure that any experts engaged as part of this review are qualified and reputable individuals.
 Remember that your reputation and credibility are at stake when information is disseminated by your organization, therefore ensure that the outcome of this review results in materials that are complete, accurate and relevant to your community and population of focus.
- Create a template review form for all reviewers to use to include documenting issues found and
 recommendations on how to address issues. When relevant, ask reviewers to use citations to
 support recommended changes. See Appendix A as an example. Note that these reports do not
 have to be submitted to OPA unless there is a concern about the extent to which you are meeting
 this expectation
- Train individuals on the process, why it's important, your expectations, and timeline for review.
 Share resources that may be helpful as part of their review. OPA has included some helpful resources for you and for your reviewers under Appendix B.
- Determine how you can embed this process into your organization's policies and protocols. Think organizational capacity and how to build this capacity. What other resources do you need beyond staffing and training? What policies need to be revisited to make this a priority and reflective of your organization's mission? What sort of written protocol can be developed for this process that it is reflective of all communication that is shared by your organization? Develop an action plan for how you will achieve this over the course of the five-year project and embed action items into your work plan each year.

Appendix A: Sample Materials Review Form

DIRECTIONS

The Office of Population Affairs (OPA) expects TPP Tier 1 recipients to conduct reviews for each type of material used throughout their grant project. Materials is an all-encompassing word used to refer to any written and verbal information related to the project that is disseminated by a grant recipient under this grant program. This may include but is not limited to program curriculum, social media post, pamphlets, posters, etc. At a minimum, these reviews should ensure that all materials are medically accurate, age appropriate, culturally and linguistically appropriate, trauma-informed, and inclusive of all youth. For each material, conduct a review using this form and submit to XXXXXXX no later than MONTH, DAY, YEAR. Please feel free to use the following resources to support you in the review of the materials.

RESOURCES

List any resources that may be helpful to your reviewers. OPA has included a list of resources that may be helpful to your reviewers under Appendix B.

REVIEW INFORMATION

- Review Completed Date:
- Review Coordinator (person who will be assigning reviews and collecting review results, etc.; include name and role/title on this grant):
- Name of Reviewer (include discipline and/or area of expertise):
- Description of Review Process (e.g., is this reviewer focusing on one particular area, such as ageappropriateness, are they reviewing multiple items, are they a sole reviewer or are they reviewing alongside others, etc.):

MATERIALS REVIEWED

As a reminder, reviews should be done on all project-related materials, not only EBPs. This may include but is not limited to public service announcements, supplemental material, awareness campaign materials, pamphlets, presentation, etc.) The review coordinator should fill out the following for each item that will be reviewed prior to sending the report template to a reviewer.

Type of Material (e.g., curriculum, video, brochure):
Edition:
Author/Publisher:
Copyright Date:
Target Audience and Setting for program implementation:
Components (e.g., workbook, handout, facilitator manual):
No. of pages/minutes (total and per component):
Does the curriculum/material include medical information: □ YES □ NO Note if the material does not include medical information a medical accuracy review does not need to be completed. However, the material should still be reviewed for age appropriateness cultural and linguistical appropriateness, trauma-informed principles, and inclusivity.
Brief description of the curriculum/material and how it will be used in the funded project:
REVIEWERS RECOMMENDATION AND FINDINGS After you complete the review of the material, please check the recommendation made for this curriculum/material and describe any findings identified.
RECOMMENDATION
RECOMMENDATION MEDICAL ACCURACY
MEDICAL ACCURACY
MEDICAL ACCURACY □ Is medically accurate
MEDICAL ACCURACY ☐ Is medically accurate ☐ Is medically accurate with modifications (recommended modifications should be described in
MEDICAL ACCURACY ☐ Is medically accurate ☐ Is medically accurate with modifications (recommended modifications should be described in the "issues section" of the review)
MEDICAL ACCURACY ☐ Is medically accurate ☐ Is medically accurate with modifications (recommended modifications should be described in the "issues section" of the review) ☐ Is NOT medically accurate, do not recommend use of the material
MEDICAL ACCURACY ☐ Is medically accurate ☐ Is medically accurate with modifications (recommended modifications should be described in the "issues section" of the review) ☐ Is NOT medically accurate, do not recommend use of the material AGE APPROPRIATENESS

should be described in the "issues section" of the review)
☐ Is NOT age appropriate for the target population, do not recommend use of the material
CULTURAL & LINGUISTIC APPROPRIATENESS
☐ Is culturally and linguistically appropriate for the target population
☐ Is culturally and linguistically appropriate for the target population with modifications
(recommended modifications should be described in the "issues section" of the review)
☐ Is NOT culturally and linguistically appropriate for the target population, do not recommend
use of the material
TRAUMA-INFORMED
☐ Is trauma-informed
☐ Is trauma-informed with modifications (recommended modifications should be described in
the "issues section" of the review)
☐ Is NOT trauma-informed, do not recommend use of the material
INCLUSIVE
INCLUSIVE ☐ Is inclusive
☐ Is inclusive
 □ Is inclusive □ Is inclusive with modifications (recommended modifications should be described in

MATERIAL REVIEW FINDINGS

Below is a sample layout for how to document issues and recommended changes. These have been separated by type of material (e.g., text and video). Feel free to add/categorize any additional medium for the material you are reviewing.

Text (include name of book, brochure, etc. you are noting issues for)

Issue 1

- Page Number:
- Paragraph or Exhibit:
- What topic does this cover?
- What are the issue area(s) (e.g., medical accuracy, age appropriateness, cultural & linguistic appropriateness, or trauma-informed)?
- What are the details of the issue?
- What is your recommendation to address the issue?

Video (include name of video you are noting issues for)

Issue 1

- Minute Number:
- Description of Scene:
- What topic does this cover?
- What issue area(s) (e.g., medical accuracy, age appropriateness, cultural & linguistic appropriateness, or trauma-informed)?
- What are the details of the issue?
- What is your recommendation to address the issue?

GENERAL COMMENTS

Please use this section to provide any general information on the curriculum as a whole that has not been addressed in previous sections and is pertinent to the review.

CERTIFICATION FOR REVIEW

I certify that all materials have been thoroughly reviewed	and recommendations and findings iden	tified
are based on my subject matter area of expertise.		

are sacea	or on my cuspost matter area or expertises.	
□ YES	S □ NO	
Reviewer'	er's Name and Credentials (Area of Expertise):	
Date:		

Appendix B: Helpful Resources

Adaptations

Adaptations eLearning

https://rhntc.org/resources/introduction-adaptations-elearning

Adolescent Development

Adolescent Development Explained

https://opa.hhs.gov/adolescent-health/adolescent-development-explained

Age Appropriate

Health Education Curriculum Analysis Tool (HECAT)

https://www.cdc.gov/healthyyouth/hecat/index.htm

Culturally and Linguistically Appropriate

National Standards for Culturally and Linguistically Appropriate Services (CLAS) https://thinkculturalhealth.hhs.gov/clas

Cultural Competence & Cultural Humility

https://ready.web.unc.edu/section-1-foundations/module-8/

5 Tips for Creating Culturally Responsive and Sustaining Youth Programs

https://steinhardt.nyu.edu/metrocenter/5-tips-creating-culturally-responsive-and-sustaining-youth-programs

Equity, culture and identity

https://extension.umn.edu/building-high-quality-youth-programs/equity-culture-and-identity

Inclusivity

Understanding LGBTQ Youth & Ensuring Inclusivity in TPP Programs

https://rhntc.org/resources/understanding-lgbtq-youth-ensuring-inclusivity-tpp-programs

Support LGBTQ+ Clients with Affirming Language Job Aid

https://rhntc.org/resources/support-lgbtq-clients-affirming-language-job-aid

DEVELOPING LGBTQ-INCLUSIVE CLASSROOM RESOURCES

https://www.glsen.org/sites/default/files/2019-

11/GLSEN LGBTQ Inclusive Curriculum Resource 2019 0.pdf

LGBTQ Inclusivity in Schools: A Self-Assessment Tool

https://www.cdc.gov/healthyyouth/disparities/mai/pdf/LGBTQ Inclusivity-508.pdf

Trauma-Informed

Creating Safe, Collaborative, and Empowering Environments Team Meeting Package https://rhntc.org/resources/creating-safe-collaborative-and-empowering-environments-team-meeting-package

A Checklist for Integrating a Trauma-Informed Approach into TPP Programs https://rhntc.org/resources/checklist-integrating-trauma-informed-approach-tpp-programs

Medical Accuracy

Introduction to Reproductive Anatomy and Physiology eLearning https://rhntc.org/resources/introduction-reproductive-anatomy-and-physiology-elearning

CDC Fact Sheet: Information for Teens and Young Adults: Staying Healthy and Preventing STDs https://www.cdc.gov/std/life-stages-populations/stdfact-teens.htm

What are some types of and treatments for sexually transmitted diseases (STDs) or sexually transmitted infections (STIs)?

https://www.nichd.nih.gov/health/topics/stds/conditioninfo/types

Sexually Transmitted Infections Prevalence, Incidence, and Cost Estimates in the United States https://www.cdc.gov/std/statistics/prevalence-incidence-cost-2020.htm

Birth Control

https://www.fda.gov/consumers/free-publications-women/birth-control

Contraception

https://www.cdc.gov/reproductivehealth/contraception/index.htm

REPRODUCTIVE RIGHTS.GOV

https://reproductiverights.gov/

*Note that this is a list of some, but not all, resources that may be available on medical accuracy, age appropriate, culturally and linguistically appropriate, trauma-informed, and inclusivity. OPA does not endorse any of the resources listed other than those developed by OPA.

Appendix C: Definitions of Terms

Adaptation - Changes made to the program content, program delivery, or other core components of an EBP.

Minor adaptations—changes to the program that make it a better fit for the population served, more current, or more engaging, but do not significantly change the program's core components or compromise program fidelity.

Major adaptations—changes to the program that alter the program's core components. A major adaptation could compromise fidelity of the program and might reduce the impact of the program on intended outcomes.

Age appropriateness - Ensures that topics, messages, and teaching methods are suitable to particular ages or age groups of children and adolescents, based on developing cognitive, emotional, and behavioral capacity typical for the age or age group. An age-appropriate program addresses students' needs, interests, concerns, developmental and emotional maturity levels, experiences, and current knowledge and skill levels. Learning is relevant and applicable to students' daily lives and concepts and skills are covered in a logical sequence.

Culturally and linguistically appropriate - Assures that materials and language used are respectful of and responsive to the cultural and linguistic needs of the population being served. This includes being respectful and responsive to individual cultural health beliefs and practices, preferred languages, health literacy levels, and communication needs.

Inclusivity - When all people, especially youth, are fully included, supported, and can actively participate in and benefit from the information they need to make healthy choices. This includes ensuring that program materials and practices do not alienate, exclude, or stigmatize individuals of diverse lived experiences and backgrounds, which includes but is not limited to, individuals who belong to underserved communities, such as Black, Latino, and Indigenous and Native American persons, Asian Americans and Pacific Islanders and other persons of color; members of religious minorities; lesbian, gay, bisexual, transgender, and queer (LGBTQ+) persons; persons with disabilities; persons who live in rural areas; and persons otherwise historically marginalized and adversely affected by persistent poverty or inequality.

Medical accuracy - Verified or supported by the weight of research conducted in compliance with accepted scientific methods; and published in peer-reviewed journals, where applicable or comprising information that leading professional organizations and agencies with relevant expertise in the field recognize as accurate, objective, and complete.

Trauma-informed approach - Refers to how a program, agency, organization, or community thinks about and responds to those who have experienced or may be at risk for experiencing trauma. It is an approach that: (1) realizes the widespread impact of trauma and potential paths for recovery; (2) recognizes the signs and symptoms of trauma in youth, families, staff, and others; (3) responds by fully integrating knowledge about trauma into policies, procedures, and practices; and (4) seeks to actively resist re-traumatization.