

# EVIDENCE-BASED PRACTICE REGISTRIES

August, 2011

 **The Larry King Center**  
for Building Children's Futures

EBP Registry	Area of Focus	Summary	Inclusion Qualifications
<p>1. Strengthening America's Families  <a href="http://www.strengtheningfamilies.org">http://www.strengtheningfamilies.org</a></p>	<p>Juvenile delinquency prevention</p>	<p>Collaboration of OJJDP and the University of Utah. The Family Strengthening Project identified 34 programs after a nationwide nomination and selection process. The chosen programs addressed a wide range of youth and family problems. Program developers submitted a 10-page program description, along with supplemental materials such as relevant research. This included program history, theoretical assumptions, expected outcomes, staffing requirements, evaluation methodology, etc. Five committees convened to determine program rating based on several factors. Each program was rated independently based on the criteria listed. Although ratings took place in 1997 and 1999, this matrix includes ratings from the more recent effort.</p>	<p>Exemplary I</p> <ul style="list-style-type: none"> <li>• Experimental design with randomized sample and replication by an independent investigator</li> <li>• Outcome data from the numerous research studies show clear evidence of program effectiveness</li> </ul> <p><i>Exemplary II</i></p> <ul style="list-style-type: none"> <li>• Experimental design with randomized sample</li> <li>• Outcome data from studies show evidence of program effectiveness</li> </ul> <p><i>Model</i></p> <ul style="list-style-type: none"> <li>• Experimental or quasi-experimental design with few/no replications</li> <li>• Outcome data indicate program effectiveness; data are not as strong in demonstrating program effectiveness</li> </ul> <p><i>Promising</i></p> <ul style="list-style-type: none"> <li>• Limited research and/or employs non-experimental designs</li> <li>• Data appear promising but requires confirmation using scientific techniques</li> <li>• Theoretical base and/or some other aspect of the program is sound</li> </ul>
<p>2. Office of Juvenile Justice and Delinquency Prevention (OJJDP) Model Programs Guide  <a href="http://www.ojjdp.gov/mpg/">http://www.ojjdp.gov/mpg/</a></p>	<p>Youth programs</p>	<p>OJJDP maintains a Model Program Guide of over 200 programs designed for the prevention and intervention of areas such as mental health, substance abuse, and education. Their website states that ratings are based on four dimensions of effectiveness: conceptual framework of program, program fidelity, evaluation design, and empirical evidence demonstrating prevention/reduction of problem behavior; reduction of risk factors; or increase in protective factors. Reviewers rate and score program evaluation studies to determine the appropriate category.</p>	<p>Exemplary</p> <ul style="list-style-type: none"> <li>• Demonstrate robust empirical findings</li> <li>• Reputable conceptual framework</li> <li>• Experimental design</li> </ul> <p>Effective</p> <ul style="list-style-type: none"> <li>• Adequate empirical findings</li> <li>• Sound conceptual framework</li> <li>• Quasi-experimental design</li> </ul> <p>Promising</p> <ul style="list-style-type: none"> <li>• Promising (perhaps inconsistent) empirical findings</li> <li>• Reasonable conceptual framework</li> <li>• Limited evaluation design (single group pre- post-test) that requires causal confirmation</li> </ul>

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<p>3. Coalition for Evidence-Based Policy  <a href="http://evidencebasedprograms.org/wordpress">http://evidencebasedprograms.org/word  press</a></p>	<p>Wide range</p>	<p>Nonprofit, nonpartisan group that utilizes an advisory board of national experts to identify interventions. Goal is to inform Congress, Executive Branch agencies, and other agencies of best practice interventions. Used an internally-developed checklist to assess if randomized controlled trials produced valid evidence. Coalition conducted literature searches and contacted topic experts to determine which programs met criteria.</p>	<p>Top Tier</p> <ul style="list-style-type: none"> <li>• Interventions shown in well-conducted randomized controlled trials, preferably conducted in typical community settings, to produce sizeable, sustained benefits to participants and/or society</li> </ul> <p>Near Top Tier</p> <ul style="list-style-type: none"> <li>• Interventions shown to meet all elements of the Top Tier standard in a single site, and only need one additional step to qualify as Top Tier – a replication trial establishing that the sizeable, sustained effects found in that site generalize to other sites</li> </ul> <p>Promising</p> <ul style="list-style-type: none"> <li>• Been found to be promising by staff, but either have not met Top Tier standards or have not yet been reviewed</li> </ul>
<p>4. National Registry of Evidence-Based Programs and Practices (N-REPP)  <a href="http://nrepp.samhsa.gov/ViewAll.aspx">http://nrepp.samhsa.gov/ViewAll.aspx</a></p>	<p>Mental illness/  substance abuse</p>	<p>Operated by Substance Abuse Mental Health Services Alliance (SAMHSA); goal is to provide public with interventions that have been scientifically tested. Submissions are voluntarily made by program developers and N-REPP chooses to evaluate those that meet minimum requirements. Reviewers examine quality of research and readiness for dissemination.</p>	<p>Reviewers rate quality of research conducted on a 0-4 scale for the following areas:</p> <ul style="list-style-type: none"> <li>• Reliability of measures</li> <li>• Validity of measures</li> <li>• Intervention fidelity</li> <li>• Missing data and attrition</li> <li>• Potential confounding variables</li> <li>• Appropriateness of analysis</li> </ul>
<p>5. Surgeon General's Report (2001)  <a href="http://www.surgeongeneral.gov/library/youthviolence/toc.html">http://www.surgeongeneral.gov/library/youthviolence/toc.html</a></p>	<p>Youth violence and crime prevention</p>	<p>An extensive literature review generated this 2001 report compiled by Dr. David Satcher along with staff from CDC, NIH, and SAMHSA in reaction to school violence at Columbine High School in 1999. Much of the information was drawn from 7 studies published in the 90s, along with data collected from datasets from various agencies. Programs were then rated based on criteria listed.</p>	<p>Model</p> <ul style="list-style-type: none"> <li>• Experimental or quasi-experimental design</li> <li>• Significant deterrent effects on: <ul style="list-style-type: none"> <li>○ Violence or serious delinquency (Level 1)</li> <li>○ Any risk factor for violence with a large effect (.30 or greater) (Level 2)</li> </ul> </li> <li>• Replication with demonstrated effects</li> <li>• Sustainability of effects</li> </ul> <p>Promising:</p> <ul style="list-style-type: none"> <li>• Experimental or quasi- experimental design</li> <li>• Significant deterrent effects on: <ul style="list-style-type: none"> <li>○ Violence or serious delinquency (Level 1)</li> <li>○ Any risk factor for violence with effect size of .10 or greater (Level 2)</li> </ul> </li> <li>• Either replication or sustainability of effects</li> </ul>

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<p>6. Blueprints for Violence Prevention (<a href="http://www.colorado.edu/cspv/blueprints/">http://www.colorado.edu/cspv/blueprints/</a>)</p>	<p>Violence, drug, and crime prevention</p>	<p>A project of the Center for the Study and Prevention of Violence at the University of Colorado. Programs are reviewed by staff and an advisory board. To date more than 900 programs have been assessed. Claim to have the most rigorous tests of effectiveness. Criteria given most weight include evidence of deterrent effect with strong research design, sustained effects and multiple site replications.</p>	<p>Model:</p> <ul style="list-style-type: none"> <li>• Experimental or quasi-experimental design</li> <li>• Evidence of deterrent effect on one outcome</li> <li>• Sustained effects for one year post-treatment</li> <li>• Replication at more than one site</li> </ul> <p>Promising:</p> <ul style="list-style-type: none"> <li>• Experimental or quasi-experimental design</li> <li>• Evidence of deterrent effect on one outcome</li> </ul>
<p>7. California Evidence-Based Clearinghouse (CEBC) (<a href="http://www.cebc4cw.org">http://www.cebc4cw.org</a>)</p>	<p>Child welfare</p>	<p>The California Department of Social Services selected the Chadwick Center for Children and Families and the Child and Adolescent Services Research Center (CASRC) to form CEBC. A state advisory committee comprised of child welfare leaders and a national scientific panel of five members rate each program. They identify an individual with expertise in selected topic areas (such as home visiting) and choose relevant programs that have strong empirical research and are marketed and used in California. They identify a representative from each program and request general information about the program. All relevant literature is identified and a team of at least three raters review the research. The programs are rated based on the listed criteria.</p>	<p>Well-Supported:</p> <ul style="list-style-type: none"> <li>• No evidence suggesting program causes harm on recipients compared to its likely benefits</li> <li>• Program has a book, manual, etc. describing specific program components and method for administering</li> <li>• At least two rigorous randomized controlled trials (RCTs) settings demonstrate the practice to be superior to comparisons. RCTs have been reported in published, peer-reviewed literature</li> <li>• Sustained effects for one year post-treatment</li> <li>• Use of valid, reliable outcome measures administered consistently and accurately</li> <li>• If multiple outcome studies have been conducted, the overall weight of the evidence supports the benefit of the practice</li> </ul> <p>Supported:</p> <ul style="list-style-type: none"> <li>• No evidence suggesting program causes harm on recipients compared to its likely benefits</li> <li>• Program has a book, manual, etc. describing specific program components and method for administering</li> <li>• At least one rigorous randomized controlled trial (RCTs) demonstrates the practice to be superior to comparisons. RCTs have been reported in published, peer-reviewed literature.</li> <li>• Sustained effects for 6 months post-treatment</li> <li>• Use of valid, reliable outcome measures administered consistently and accurately</li> <li>• If multiple outcome studies have been conducted, the overall weight of the evidence supports the benefit of the practice</li> </ul> <p>Promising</p> <ul style="list-style-type: none"> <li>• No evidence suggesting program causes harm on recipients compared to its likely benefits</li> <li>• Program has a book, manual, etc. describing specific program components and method for administering</li> <li>• At least one study utilizing some form of control has shown the practice's benefit over the placebo, or found it to be comparable to or better than an appropriate comparison practice. The study has been reported in published, peer-reviewed literature</li> <li>• If multiple outcome studies have been conducted, the overall weight of evidence supports the benefit of the practice</li> <li>• CEBC also identified three more categories: Evidence Fails to Demonstrate Effect, Concerning Practice and Not Able to Be Rated. These were not included in this chart.</li> </ul>

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<p>8. Promising Practices Network (PPN)  <a href="http://www.promisingpractices.net/programs.asp">http://www.promisingpractices.net/programs.asp</a></p>	<p>Positive outcomes for children</p>	<p>Operated by the RAND Corporation, a nonpartisan think tank, PPN is comprised of individuals and agencies nationwide such as The Colorado Foundation for Families and Children, The Family and Community Trust, Georgia Family Connection Partnership and The Foundation Consortium for California's Children &amp; Youth. No formal applications are required for program consideration. They do not require programs to have been replicated, or that program evaluations have been in peer-reviewed journals. Programs are rated based on listed criteria.</p>	<p>Proven:</p> <ul style="list-style-type: none"> <li>• Program must directly impact PPN identified indicators</li> <li>• At least one outcome is changed by at least 20% or 0.25 standard deviations</li> <li>• At least one outcome with a substantial effect size is statistically significant at the 5% level</li> <li>• Study design uses an experimental or quasi-experimental design</li> <li>• Sample size of evaluation exceeds 30 in treatment and comparison groups</li> <li>• Program evaluation is publicly available</li> </ul> <p>Promising:</p> <ul style="list-style-type: none"> <li>• Program impacts an intermediary outcome for which there is evidence of it's association with one of the PPN indicators</li> <li>• Outcome change is significant at the 10% level</li> <li>• Change in outcome is more than 1%</li> <li>• Study has a comparison group, but it may exhibit some weaknesses</li> <li>• Sample size of evaluation exceeds 10 in both the treatment and comparison groups</li> <li>• Program evaluation is publicly available</li> </ul> <p>Not Listed on the Site:</p> <ul style="list-style-type: none"> <li>• Does not meet qualifications for promising category</li> </ul>
<p>9. Find Youth Info  <a href="http://www.findyouthinfo.org/ProgramSearch.aspx">http://www.findyouthinfo.org/ProgramSearch.aspx</a></p>	<p>Youth violence, drug abuse, and crime</p>	<p>Created by Interagency Working Group on Youth Programs (IWGYP), a group of 12 individuals from youth-serving federal agencies. The registry is one part of their mission to promote positive outcomes for youth. The registry features programs developed to prevent or reduce delinquency or other problems among youth. Programs are added via nominations and are then subject to a review process. Evaluation studies are reviewed to determine the degree to which program is based on a sound conceptual framework; was implemented as designed; degree to which research design established causal relationships between treatment and outcomes; and how well the evaluation findings support the program.</p>	<p>Level 1:</p> <ul style="list-style-type: none"> <li>• Programs implemented with a high degree of fidelity</li> <li>• Programs demonstrate robust empirical findings</li> <li>• Use of a reputable conceptual framework</li> <li>• Use of an evaluation design of the highest quality (experimental)</li> </ul> <p>Level 2:</p> <ul style="list-style-type: none"> <li>• Programs implemented with sufficient fidelity</li> <li>• Programs demonstrate adequate empirical findings</li> <li>• Programs used a sound conceptual framework</li> <li>• Evaluation design of high quality (quasi-experimental)</li> </ul> <p>Level 3:</p> <ul style="list-style-type: none"> <li>• Programs implemented with minimal fidelity</li> <li>• Programs demonstrate promising, perhaps inconsistent empirical findings</li> <li>• Use of a reasonable conceptual framework</li> <li>• Use of a limited evaluation design (single group pre-test) that requires causal confirmation using more appropriate experimental techniques</li> </ul>

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<p>10. Child Trends  <a href="http://www.childtrends.org/docdisp_page.cfm?LID=12147DD0-0FBF-4741-8FF095140FC97836">http://www.childtrends.org/docdisp_page.cfm?LID=12147DD0-0FBF-4741-8FF095140FC97836</a></p>	<p>Wide range, including child poverty, child welfare, child development</p>	<p>Nonprofit, nonpartisan research center whose mission is to improve children's outcomes by providing research to affect changes in policy and practice. They maintain the LINKS database which includes only social programs evaluated using a randomized, controlled trial. Website indicates that they attempt to be as inclusive as possible.</p>	<p>Child Trends have created charts to visually represent effective programs based on their effect size. Out of the four charts created, Chart D includes social programs included in their database that have large effect sizes, come with program manuals, and are considered cost effective. The matrix includes programs that meet all of these criteria and were therefore represented on Chart D on the Child Trends website.</p>
<p>11. HomVEE  <a href="http://homvee.acf.hhs.gov/HomVEE_Executive_Summary.pdf">http://homvee.acf.hhs.gov/HomVEE_Executive_Summary.pdf</a></p>	<p>Home visiting programs</p>	<p>Federal initiative by the US DHHS to conduct a review of the home visiting literature and provide an assessment of the effectiveness of the available programs. Review was conducted by Mathematica Policy Research group and included representatives from several federal agencies. Studies were included that used a randomized, controlled trials, quasi-experimental, or implementation design; examined 8 eligible outcome domains. They ranked eligible models and prioritized 11 program models for review. Among the 11 reviewed, 7 were identified as meeting the federal government's definition of evidence-based.</p>	<p>Trained reviewers assessed the research design of each study and assigned ratings of high, moderate, or low. They did not include studies that received a low rating. High ratings consist of samples with low attrition, random assignment, and "single case and regression discontinuity designs" that met the What Works Clearinghouse (WWC) standards. Moderate rating was given to studies that had random assignment but have high attrition, or other study design flaws. Must have "matched comparison group designs that establish baseline equivalence on selected measures", based on the WWC standards. To meet the standards for evidence-based, programs must have either: one high- or moderate-quality study that finds favorable impacts in at least two outcome domains; or at least two high- or moderate-quality impact studies that find one or more favorable impacts in the same domain. Outcomes included child health, maternal health, positive parenting practices, reduction in child maltreatment, etc.</p>
<p>12. Washington Institute for Public Policy  <a href="http://www.wsipp.wa.gov/rptfiles/04-07-3901.pdf">http://www.wsipp.wa.gov/rptfiles/04-07-3901.pdf</a></p>	<p>Education, criminal justice, welfare, children and adult services, health, utilities, and general government</p>	<p>Created by the Washington State legislature in 1983. Their mission is to conduct non-partisan research, with guidance from legislatures, on current issues important to the State of Washington. The report from which these data are compiled is entitled "Benefits and Cost of Early Prevention and Early Intervention Programs for Youth" by Steve Aos, Roxanne Lieb, Jim Mayfield, Marna Miller and Annie Pennucci.</p>	<p>The authors of this study conducted a literature review, searching more than 3,500 documents for studies that scientifically evaluated programs and addressed one of seven outcomes: reduce crime; lower substance abuse; improve educational outcomes such as test scores and graduation rates; decrease teen pregnancy; reduce teen suicide attempts; lower child abuse or neglect; and reduce domestic violence. The Legislature also requested an economic analysis of programs' costs and benefits. To do this, the researchers constructed a complex benefit-cost model to assign monetary values to any observed changes in the outcomes listed above. For more detailed information about this analysis, please refer to Washington Institute for Public Policy's <i>Benefits and Costs of Prevention and Early Intervention Programs for Youth</i> (2004) at the link provided.</p>