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Evidence-Based Social Policy: Recommendations for Programs that Fit Communities' Needs

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This brief summarizes a longer Social Policy Report

Opportunities and Challenges in Evidence-Based Social Policy

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Why Does This Matter?

Since 2010, the federal government has dramatically increased investment in evidence-based policy by prioritizing funding for intervention or prevention programs that demonstrate evidence of effectiveness. For these investments to pay off, and to improve outcomes for children and families, evidence-based programs must be supported for high-quality implementation nested in a unique local context. Few evidence-based programs have been scaled to diverse populations and places, and it's not always clear how to translate, adapt, and optimize evidence-based programs to fit such contexts.

If evidence-based programs are not designed to be carried out on a large scale, disseminated effectively, or supported for high-quality implementation, they risk not delivering promised outcomes for children and families.

Background

- There has been a movement toward public policy that directs funding for programs and practice with evidence of effectiveness in achieving outcomes. For example, legislation authorizing the Maternal, Infant, and Early Childhood Home Visiting Program requires that most of the $1.5 billion dollars over the program's five years be spent on models that have evidence they improve outcomes.
- Evidence-based policy involves integrating the best scientific knowledge, clinical experience, and input from clients to choose the most effective course of action for a problem. Interest in applying these concepts to social policy comes, in part, from increasing pressure by federal, state, and local funders to demonstrate improved outcomes for children and families from social expenditures.
- There has also been a rapid increase in federally sponsored systematic reviews that support states' and communities' selection of programs or practices with evidence of effectiveness.
- However, most evidence is from small-scale, tightly controlled efficacy trials in a few communities, so it's unclear whether programs will show the same impacts in different communities with different populations.
- An emerging body of research (summarized here) is pointing to the importance of planning for and carefully structuring the transition from small and tightly controlled demonstration projects to large-scale implementation in communities.

What the Research Says

- Developers need to articulate up front the technical and organizational resources needed to deliver an evidence-based program at scale.
- An infrastructure is needed for consulting with sites about program selection, fit, adaptation, and implementation requirements. Such an infrastructure also needs to provide initial and ongoing training and technical assistance, and support to maintain the program's fidelity.
- Comprehensive needs assessments can help identify how the needs of the community, the outcomes targeted by the evidence-based program, and the resources available to support implementation align.
- Once a community begins implementing a program, ongoing communication from practitioner to developer seems important to successful efforts.
- Program implementers should explicitly negotiate stakeholder roles and responsibilities.
- Continuous quality improvement—using administrative data to monitor the quality of implementation and outcomes, then modifying systems or services to optimize processes, procedures, and outcomes—is key to effective implementation. Practitioners, program administrators, and developers who use this learn from each other and strengthen programs.

Implications for Policy and Practice

Substantial progress in prioritizing evidence-based programs has occurred during the past decade; home-visiting and teen pregnancy-prevention programs are recent examples. Policymakers, program implementers, and researchers have a role in ensuring that such evidence-based programs are implemented with fidelity at scale. Specifically:

- Evidence-based programs should be designed and tested from the start to be implemented at scale, keeping in mind the potential end users and local contexts.
- Programs should be documented well enough to be implemented in new sites.
- An infrastructure should be put into place to support disseminating information about evidence-based programs, a technical support system should be available to help communities select appropriate programs and put them in place with fidelity,
- and data should be available for ongoing quality improvement.
- Developers, program administrators, and potential clients should communicate and provide regular feedback about the program.

This brief summarizes a longer Social Policy Report,"Opportunities and Challenges in Evidence-Based Social Policy," by **Lauren H. Supplee**, Director of the Division of Family Strengthening, Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services, and **Allison Metz**, Director, National Implementation Research Network, and Senior Scientist, FPG Child Development Institute, University of North Carolina, Chapel Hill.

The role of federal staff on this report is advisory. The opinions and assertions presented in this report do not purport to represent those of the Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services; the National Implementation Research Network; or the FPG Child Development Institute, University of North Carolina, Chapel Hill.