“IT PAYS TO ASK... IT PAYS TO KNOW”

Understanding the Research Lingo

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Understanding Research Lingo & Lists

**Lingo**
- Best practices
- Promising approaches
- Research-based
- Science-based
- Evidence-based

**Lists**
- Blueprints for Healthy Youth Development
- SAMHSA National Registry of Evidence-based Programs and Practices
- OJJDP Model Programs Guide

“IT PAYS TO ASK...IT PAYS TO KNOW”
What’s the difference?

• **Best Practices**
  “We’ve done it and we like it”

• **Promising Approaches**
  “We really think that this will work…but we need time to prove it”

• **Research-based / Science-based**
  “The intervention is based on a sound theoretical foundation”

• **Evidenced-based**
  “This intervention has been tested and shown to work”
What’s the difference?

Not Sure

Best Practices

Think It Might

Promising Approaches

Science Says It Will

Research-Based

Highly Confident

Evidence-Based

“IT PAYS TO ASK...IT PAYS TO KNOW”
Programs/services can be placed along a continuum of confidence based on their evidence or theory.

**Continuum of Confidence**

- **Very Confident**
  - **Effective**
    - "This program is based on sound theory informed by research"
  - **Promising**
    - "We really think this will work... but we need time to prove it"
  - **Research-based**
    - "This program is based on sound theory informed by research"
  - **Evidence-Based**
    - "This program has been rigorously evaluated and shown to be effective"
  - **Unknown**
    - "We really think this will work... but we need time to prove it"
  - **Promising Approaches**
    - "We really think this will work... but we need time to prove it"
  - **Best Practices**
    - "We’ve done it and we like it"
  - **Iatrogenic (Harmful)**
    - "This program has been rigorously evaluated and shown to be harmful"
  - **Ineffective**
    - "This program has been rigorously evaluated and shown to have no positive or negative effect"
  - **Harmful**
    - "This program has been rigorously evaluated and shown to be harmful"

How confident are we that this program or practice is a good use of resources AND improves outcomes for children and families?

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*Bumbarger & Rhoades, 2012*
Evidence-based programs

- Theoretically sound interventions
- Have been evaluated using a well-designed study
  - Randomized controlled trial
    - Experimental design in which participants are randomly assigned to either receive or not receive the intervention
    - In theory, both groups should be exactly the same because of random assignment
    - Considered the “Gold Standard” for determining the causal effects of a program
  - Strong quasi-experimental design
    - Type of experimental design in which subjects are not randomly assigned to experimental or control groups
    - Used when it is inappropriate to randomly assign and develop a control group
    - Next best form of design
- Have demonstrated significant improvements in targeted outcomes
- Evidence is strengthened by
  - Independent replication
  - Sustained benefits

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Simple pre-post comparison

We can compare the difference between pre-test and post-test

But...

• What if something else caused the change?
• If the post-test isn’t better, does that mean the program didn’t work?
• What would have happened in the absence of the program?
• Are these kids representative of all kids?

“IT PAYS TO ASK... IT PAYS TO KNOW”
Randomized controlled trial

Randomization

Pre-test

Prevention Program

Post-test

Pre-test

Prevention Program

Post-test

“IT PAYS TO ASK...IT PAYS TO KNOW”
All “Model Programs” are not equal

- Relevance of the conceptual model (Theory of Change)
- Quantity and quality of evidence
- Generalizability of evidence
- Economic feasibility
- Local “fit”
- Breadth of impact
- TA and training infrastructure
- Peer network opportunities
- Sustainability

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