



UNIVERSITY *of* MARYLAND
SCHOOL OF SOCIAL WORK

Observations on the Research to Practice Continuum in Child Welfare

National Child Welfare Evaluation Summit

August 29, 2011

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Evidence to Practice Challenges

- “It takes an estimated average of 17 years for only 14% of new scientific discoveries to enter day-to-day clinical practice.”
- CWS has almost no programs in its rigorous evidence corner

Defining our Terms of Reference



"I'm beginning to wonder if our Terms of Reference may be a little too broad..?"

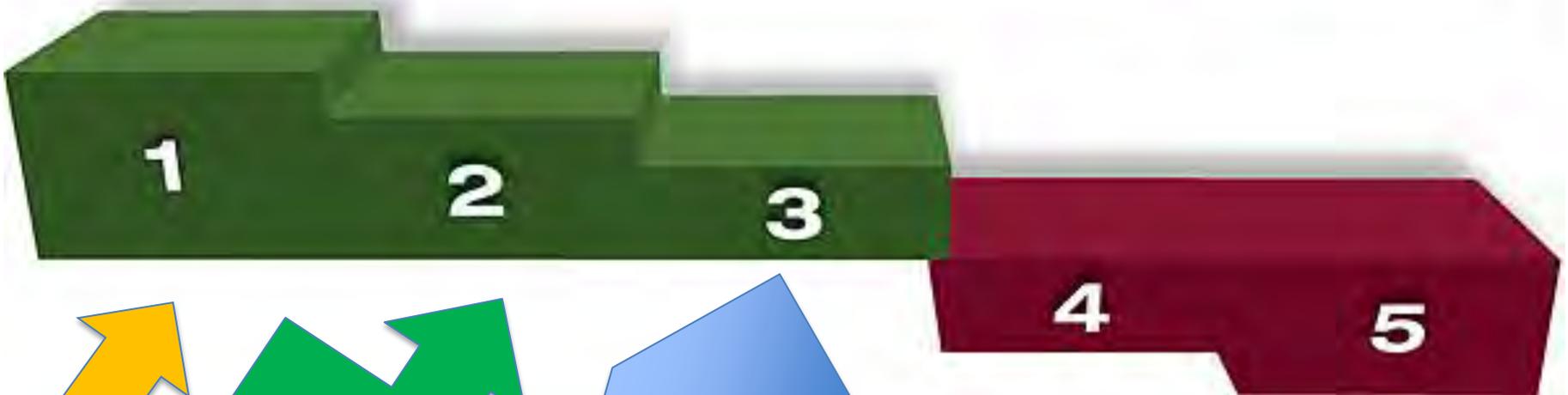
Evidence Matters

- Lots of evidence that evidence matters more than ever:
 - The mission of the Institute of Education Sciences (IES) is to provide **rigorous evidence** on which to ground education practice and policy.
 - Recent Announcement from ACF called for “**evidence-based, evidence-informed, and promising programs and practices**” interventions regarding trauma
 - YET, WE HAVE ALMOST NO CWS INTERVENTIONS WITH RIGOROUS EVIDENCE

CEBC4CW Scientific Rating Scale

Well-Supported

Concerning



-
- Manualized
 - One RCT
 - No Harm
 - 6-Months Benefit
 - Published in Peer Review Literature

EVIDENCE INFORMED

NR
Not Able to
be Rated

Relevance to Child Welfare Scale

- 1.** **High:**
The program was **designed** or is commonly used to meet the needs of children, youth, young adults, and/or **families receiving child welfare services**.

- 2.** **Medium:**
The program was designed or is commonly used to serve children, youth, young adults, and/or families who are **similar** to child welfare populations (i.e. in history, demographics, or presenting problems) **and likely included current and former child welfare services recipients**.

- 3.** **Low:**
The program was designed to serve children, youth, young adults, and/or families **with little apparent similarity** to the child welfare services population.

Science=1 or 2, CW Relevance=1, SAFETY

TWO PROGRAMS

1. Child Parent Psychotherapy (CPP)

2. Project SUPPORT

Science=1 or 2, CW Relevance=1, PERMANENCY

TWO PROGRAMS

1. Homebuilders®

2. Multidimensional Treatment Foster Care for Preschoolers (MTFC-P)

Science=1 or 2, CW Relevance=1, WELL-BEING

1. Trauma Focused CBT
2. Child Parent Psychotherapy (CPP)
3. Childhaven Therapeutic Child Care
4. Multidimensional Treatment Foster Care for Preschoolers (MTFC-P)
5. Project SUPPORT
6. Together Facing the Challenge
7. Homebuilders®

Science=1 or 2, CW Relevance=2

FORTY TWO PROGRAMS

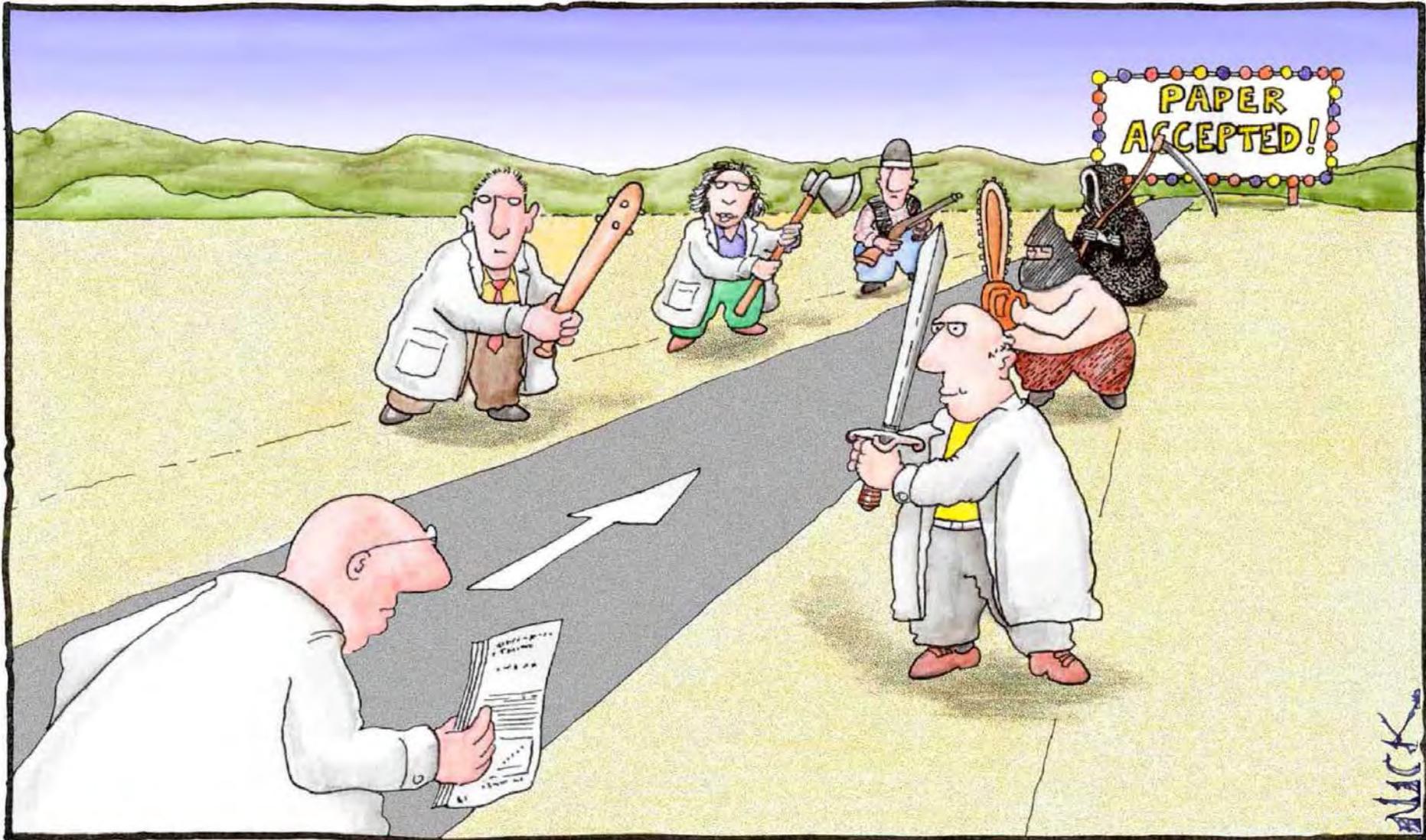
- A significant opportunity is to bring programs that have had good evidence of some benefit with distressed children and families to CWS

Science=1, 2, or 3, CW Relevance=1 (n=26)

- Promising = 19 Programs
- Some Support (2)= 6 Programs
- Well Supported = 1 Program

- A great need is to more rigorously test programs that are in CWS but have not yet received rigorous evaluation and get them into peer review publications

Improved Peer Review Processes!



Most scientists regarded the new streamlined peer-review process as “quite an improvement.”

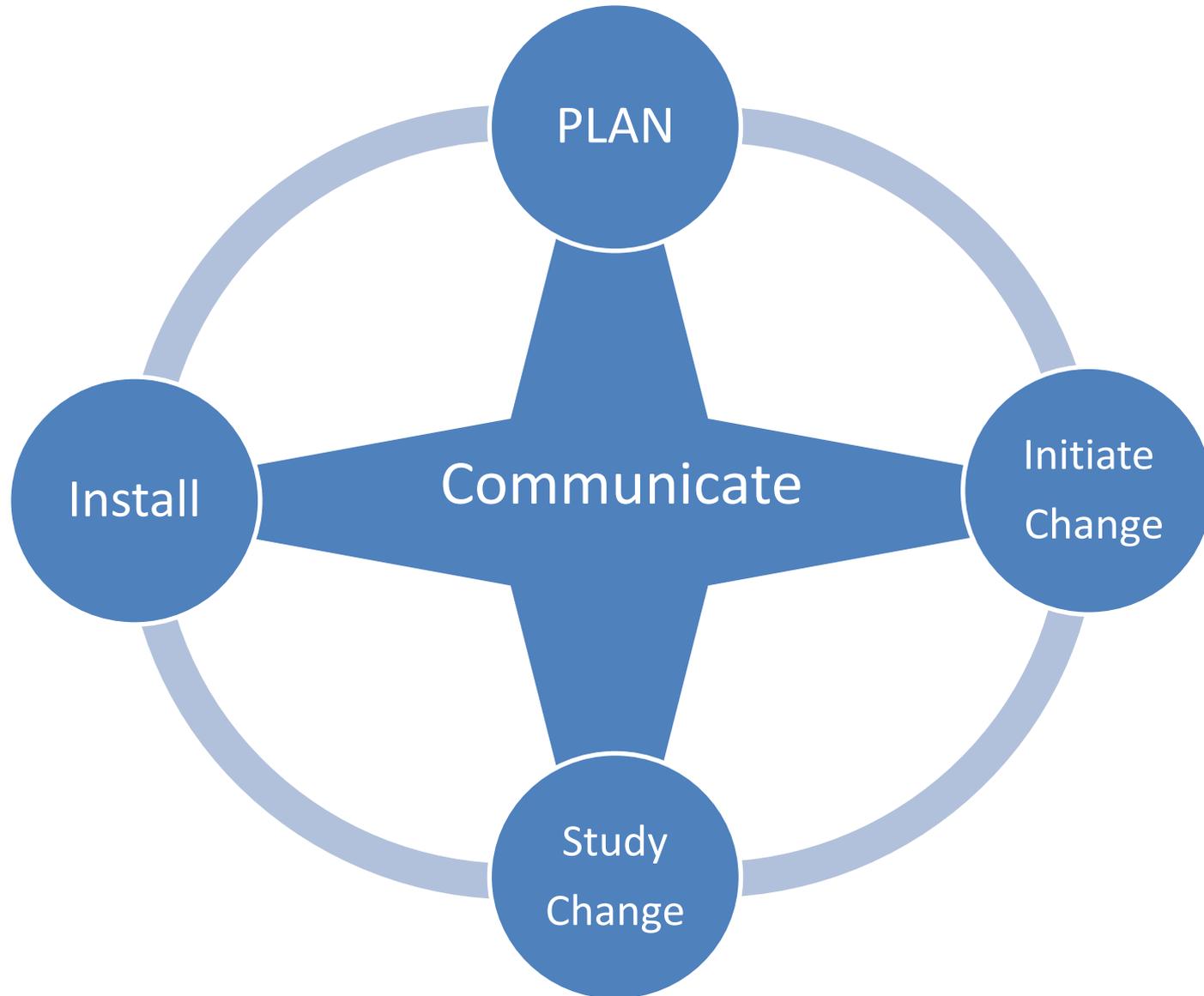
Research v. Evaluation

- Both research and evaluation ask *what is*.
- Then research asks *why?*
 - How has this situation arose and what would change it?
- Evaluation asks *what should be and have we achieved it?*
 - *Evaluation helps make judgments about the value of a program for participants and the public*
- Evaluation and research converge when the evaluation design is rigorous enough to clarify what is contributing to change

How Does Evaluation Contribute to Rigorous Evidence and CWS Relevance ?

- Evaluation is maximally useful when it is configured to achieve client, program, and policy goals
- Evaluation offers the opportunity of strong communication among all key figures during the trials

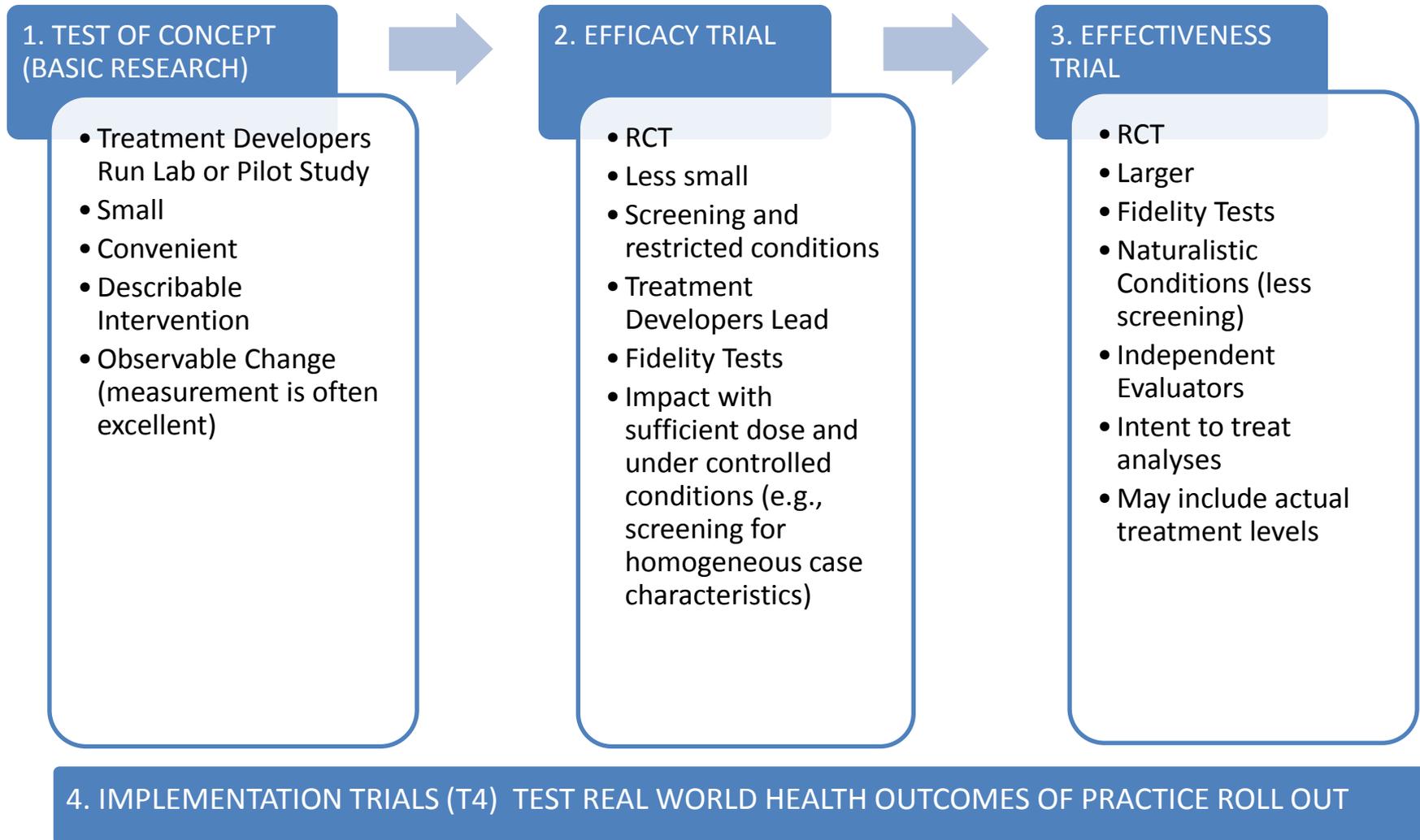
Evaluation is Less Linear Than Conventional Translational Research



How is CWS Research Different than Health Services Research?

- CWR involves very complex systems of care and the courts
 - Many operations or medications are relatively singular
- CWS-R and HS-R have relied on different paths to becoming evidence based
 - HSR: multi-step translational research process that is very slow
 - CWS-R: leapfrog approach, from practice innovation to effectiveness trial
- CWS-R and HS-R

Health Services Research SOP: From Concept to “Evidence-Based”



CWS SOP: From Concept to “Evidence-Based”

1. TEST OF CONCEPT

- In a single CWS unit under naturalistic conditions—an effectiveness trial without the research design
- Measurement is usually weak
- May spread to other units in a CSWA—or to other organizations

2. EFFICACY TRIAL

- Open trial (may add a comparison group) in Naturalistic Conditions
- Less small
- Treatment Developers Remain Very Involved in Evaluation
- May be Manualized
- May have Fidelity Tests
- May add a comparison group

3. EFFECTIVENESS TRIAL

- RCT
- Larger
- Fidelity Tests
- Naturalistic Conditions Continued
- Independent Evaluators
- Intent to treat analyses
- [NOTE: CWS OFTEN SKIPS THIS STEP]

4. IMPLEMENTATION: OFTEN INCLUDES SIGNIFICANT MODIFICATION OF THE INTERVENTION DURING ROLL OUT

More on Implementation & CWS

- Often occurs without prior efficacy or effectiveness trials—primarily based on a concept or legal action
- Must accommodate significant differences in local laws, workforce characteristics, and non-profit service capacity
- Like HS-R there are few dedicated resources put toward implementation but unlike HS-R the differences between the implementation sites are far greater

Toward a Powerful CWS Approach

- Balance threats to internal and external validity by bringing more internal validity to pilot work and effectiveness trials.
- Take advantage of the fact that there are no labs and efficacy trials are in naturalistic settings
 - (1) more extensive work in the pilot phase to test the model and manualize it;
 - (2) investing in implementation analysis to provide the best alternative for the effectiveness trial;
 - (3) engaging treatment developer and independent evaluator together in effectiveness trial design work

Partial References

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