



What is Evidence-Based Practice?

Evidence-Based Practice (EBP) is defined as bringing together the best available research, professional expertise, and input from youth and families to identify and deliver services that have been demonstrated to achieve positive outcomes for youth, families, and communities. Since the youth and families we serve deserve the best treatment available it's important to evaluate the techniques you are currently using to ensure your practices meet these standards. This may require being flexible and open to implementing new practices. But the reward of offering youth and families the best we have to offer should be enough reason to adopt Evidence-Based Practices into the services you provide.

Some people may believe the use of Evidence-Based Practices de-emphasizes decisions based on experience, authority or opinion. However, using Evidence-Based Practices simply means identifying the best available research and combining it with other factors for the best results. So, advocates of EBP do not minimize the importance of experience because they believe evidence-based practices should be integrated with the experiences and resources that agencies bring to practice. In addition, many funding entities require agencies to document service outcomes and identify the Evidence-Based Practices they utilize.

There are several key considerations for Runaway and Homeless Youth Providers as they move toward the implementation of Evidence-Based Practices. It is important for providers to note how the Family and Youth Services Bureau (FYSB) defines Evidence-Based Practices, gain an understanding of the steps for implementing Evidence-Based Practices, become familiar with available resources on Evidence-Based Practices, and consider some of the Evidence-Based Practices that grantees are using.

How does FYSB Define Evidence-Based Practices?

The Family Youth Service Bureau (FYSB) has worked to create a framework that takes the best of what programs are doing individually to help all programs be successful. Based on the years of work by runaway and homeless youth providers and the best emerging evidence about what runaway and homeless youth need to succeed, FYSB believes the most critical outcomes for runaway and homeless youth are: safety, well-being, permanent connections, and self-sufficiency.



It is clear that Evidence-Based Practices help agencies provide the best treatment available and allow agencies to evaluate their outcomes. However, they are most effective when integrated with other factors that are tailored to the organization providing the services. It is also clear that since Evidence-Based Practices are continuously improved and updated, your agency should continuously evaluate their use within your agency. Using some of the outcomes evaluation tools that we will identify and seeking input from youth and families are ways to evaluate the use of Evidence-Based Practices. Using resources that identify the best Evidence-Based Practices available will also improve your ability to provide the best services to youth and their families and facilitate the achievement of safety, well-being, permanent connections, and self-sufficiency outcomes for runaway and homeless youth.

Steps to Implementing Evidence-Based Practices

The implementation of Evidence-Based Practices may seem like a daunting task for some youth serving agencies. However, Gambrill's Transparency as the route to evidence-informed professional education offers these key steps on implementing evidence-based practices:

1. Convert information needs related to practice decisions into well-structured answerable questions;
2. Track down with maximum efficiency, the best evidence with which to answer them;
3. Critically appraise evidence for its validity (level of effectiveness), impact (size of effect) and applicability (usefulness in practice);
4. Apply the results of this appraisal to practice-policy decisions. This involves deciding whether evidence found (if any) applies to the decision at hand (e.g., is a client similar to those studied? Is there access to services described?) and considering client values and preferences in making decisions as well as other application concerns;
5. Evaluate effectiveness and efficiency in carrying out steps 1 – 4 and seek ways to improve them in the future.¹

There are several tools available to evaluate the wide body of Evidence-Based Practices available. One such tool is the National Registry of Evidence-Based Programs and Practices (NREPP). This tool developed by the Substance Abuse and Mental Health Services Administration (SAMHSA) is a searchable database (<http://nrepp.samhsa.gov>) of interventions that have been reviewed and rated by independent reviewers. The NREPP provides general information, ratings and a list of studies and materials reviewed about each intervention. The information contained in a NREPP report can help you begin to determine whether a particular intervention may meet your programmatic needs. The site also has a document containing questions to ask Evidence-Based Practice developers. ([http://nrepp.samhsa.gov/pdfs/Questions To Ask Developers.pdf](http://nrepp.samhsa.gov/pdfs/Questions_To_Ask_Developers.pdf))

¹Gambrill, E. (2006, October) Transparency as the route to evidence-informed professional education. Paper presented at the Improving the Teaching of Evidence-Based Practice conference, Austin, Texas; 24 p. 7

What are Some Evidence-Based Practices that RHY Providers are Using?

RHYTTAC recently requested input from grantees on the Evidence-Based Practices they use in their programs. We have included a portion of the NREPP description and link to the NREPP report for Evidence-Based Practices that grantees have indicated they use. This is not an exhaustive list of Evidence-Based Practices; to view the 207 Evidence-Based Practices that are highlighted on the NREPP site go to

<http://nrepp.samhsa.gov/ViewAll.aspx>

- **Cognitive Behavioral Therapy for Adolescent Depression**
(<http://nrepp.samhsa.gov/ViewIntervention.aspx?id=106>) Cognitive Behavioral Therapy (CBT) for Adolescent Depression is a modified version of the classic cognitive therapy model developed by Aaron Beck and colleagues which emphasizes the way client's think and feel.
- **Motivational Interviewing** (<http://nrepp.samhsa.gov/ViewIntervention.aspx?id=130>) Motivational Interviewing (MI) is a goal-directed, client-centered counseling style whose goal is to seek behavioral change by helping clients to explore and resolve ambivalence.
- **Seven Challenges Substance Abuse Interventions**
(<http://nrepp.samhsa.gov/ViewIntervention.aspx?id=159>) The Seven Challenges is designed to treat adolescents with drug and other behavioral problems. Rather than using pre-structured sessions, counselors and clients identify the most important issues at the moment and discuss these issues while the counselor integrates the seven challenges into the conversation.
- **Trauma Focused Cognitive Behavioral Therapy**
(<http://nrepp.samhsa.gov/ViewIntervention.aspx?id=135>) Trauma-Focused Cognitive Behavioral Therapy (TF-CBT) is a psychosocial treatment model designed to treat posttraumatic stress and related emotional and behavioral problems in children and adolescents. The treatment model is designed to be delivered by trained therapists who initially provide parallel individual sessions with children and their parents (or guardians), with parent-youth sessions increasingly incorporated over the course of treatment.

How are Evidence-Based Practices Best Used?

Grantees found Evidence-Based Practices were most effective when used to determine and achieve outcomes. In order to measure outcomes and continually evaluate the effectiveness of their program, agencies are using existing screening and assessment instruments that are already available, tested and were determined to be reliable. Since many funding entities require agencies to document and report service outcomes, agencies should become familiar with screening and assessment tools available. The National Clearinghouse on Families and Youth (NCFY) identified several screening and assessment instruments that runaway and homeless youth agencies are using for outcomes evaluation, this can be accessed at ncfy.acf.hhs.gov/publications/assessment-screening/. It's also important to remember that Evidence-Based Practices are best evaluated by talking to the youth and families you serve and integrating their feedback into the use of Evidence-Based Practices.

Resources on Evidence-Based Practices

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For more information, contact RHYTTAC at info@rhyttac.net or call 1- 888-290-7233.