What is Evidence-Based Practice?

Evidence-based practice is a process that brings 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. Evidence-based programs and practices (EBPPs) are specific techniques and intervention models that have shown to have positive effects on outcomes through rigorous evaluations. Since the youth and families served by the Runaway and Homeless Youth Program deserve the best treatment available, it’s important for providers to evaluate the techniques that are currently being used to ensure that practices meet these standards.

Some people may believe the use of evidence-based programs and practices de-emphasizes decisions based on experience, authority or opinion. However, using evidence-based programs and practices simply means identifying the best available research and combining it with other factors for the best results. Advocates of evidence-based programs and practices do not minimize the importance of experience. Instead, they believe evidence-based programs and 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 programs and practices they utilize.

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

How does FYSB Define Evidence-Based Practices?

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 programs and practices help agencies provide the best treatment available and allow agencies to evaluate their impacts. However, they are most effective when chosen for, and, sometimes, adapted to, the organization providing the services and local needs. It is also clear that since evidence-based programs and practices are continuously improved and updated, agencies should continuously evaluate their use. Using outcome assessment tools and seeking input from youth and families are ways to assess the use of evidence-based programs and practices. Using resources that identify the best evidence-based programs and practices available will also improve the ability of agencies to provide the best services to youth and their families and facilitate the achievement of safety, well-being, permanent connections, and self-sufficiency outcomes.

Steps to Implementing Evidence-Based Programs and Practices

The implementation of evidence-based programs and practices may seem like a daunting task for some youth-serving agencies. However, Gambrill offers these key steps on implementing evidence-based programs and 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 programs and 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. NREPP provides general information, ratings and a list of studies and materials reviewed about each intervention. The information contained in an NREPP report can be useful when determining whether a particular intervention meets programmatic needs. The site also has a document containing questions to ask evidence-based program and practice developers. (http://nrepp.samhsa.gov/pdfs/Questions_To_Ask_Developers.pdf)

What Evidence-Based Programs and Practices are RHY Providers Using?

FYSB recently requested input from grantees on the evidence-based programs and practices currently being used. This is not an exhaustive list of evidence-based programs and practices; to view the 207 evidence-based programs and practices that are highlighted in NREPP, go to nrepp.samhsa.gov/ViewAll.aspx:

  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 Programs and Practices Best Used?

Grantees found evidence-based programs and practices were most effective when used to achieve outcomes. In order to measure outcomes and continually evaluate the effectiveness of programs, agencies are using existing screening and assessment instruments that are already available, tested and 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 (ncfy.acf.hhs.gov/publications/assessment-screening/). It’s also important to note that, when selecting or developing evidence-based programs and practices, talking to youth and families served helps to make informed decisions about the evidence-based programs and practices that are useful and appropriate.