

Based on the Evidence: Understanding the Core Components of Evidence-Based Practice

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Louisiana Moving Forward

Vision

- Develop the capacity of targeted areas in the JJS to more effectively meet the needs of both the youth and the community, through use of evidenced-based practices.

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The Importance of EBPs

Helping to move the field from a conclusion that “nothing works” to being able to repeatedly and visibly demonstrate positive outcomes for youth.

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What are Evidence-Based Programs?

Programs with acceptable scientific evidence that they actually reduce future delinquency, violence, drug use, and other problem behaviors.

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Why EBPs?

Strong Research Design

Evidence of Significant Deterrent Effects

Sustained Effects

Multiple Site Replication

- Cost-effectiveness

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Outcomes Associated with EBPs

Reduce rates of re-arrest

Improved family functioning and school performance

Decreased drug use and mental health symptoms

Reduced rates of out-of-home placements

Cost savings

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PROGRAMS

Most programs have no credible evaluation at reducing violence, drug use, and/or delinquency (1 000 studies reviewed by the Univ. of Colorado)

Of those with credible evaluations:

- Most don't work
- 30 to 35 clearly work or have promise
- A few appear to be harmful

(Thornberry & Mihalic, 2008)

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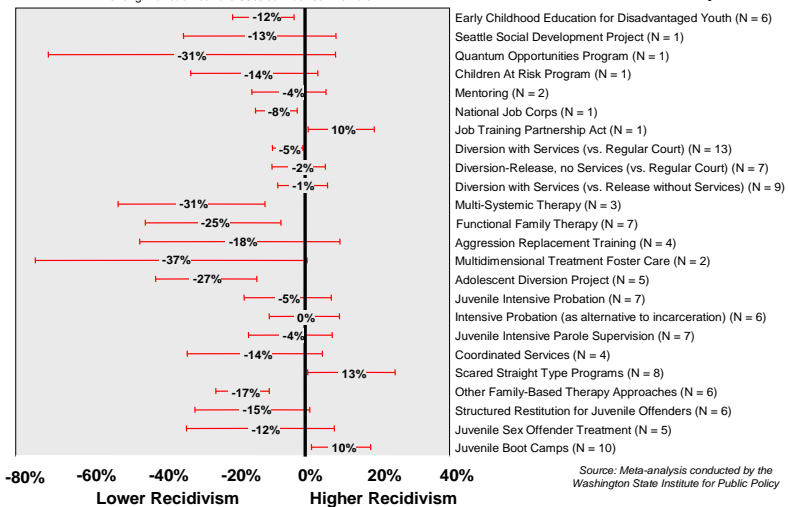
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The Estimated Effect on Criminal Recidivism for Different Types of Programs for Youth and Juvenile Offenders

The number in each bar is the "effect size" for each program, which approximates a percentage change in recidivism rates. The length of each bar are 95% confidence intervals.

Type of Program, and the Number (N) of studies in the Summary



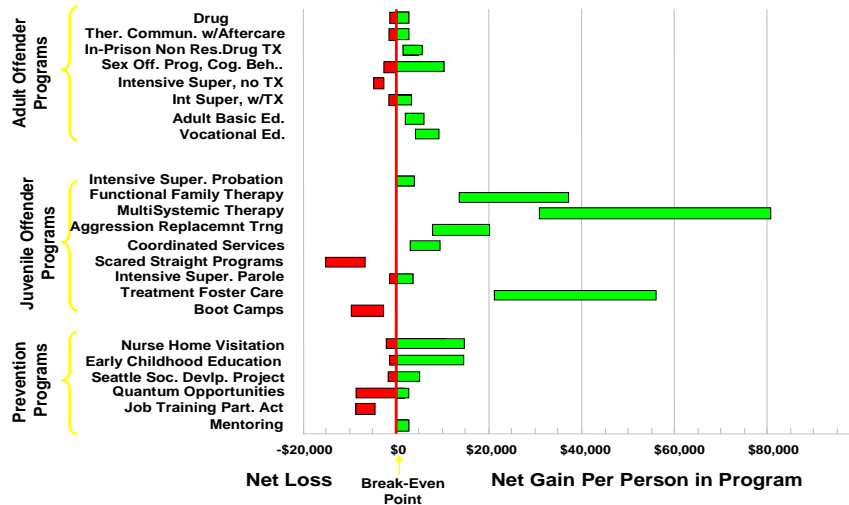
Source: Meta-analysis conducted by the Washington State Institute for Public Policy

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Economic Estimates From National Research For Adult & Juvenile Justice and Prevention Programs



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Benefit-to-Cost Ratios: Selected Blueprint Programs*

<u>Program</u>	<u>Ratio</u>	<u>Outcome</u>
FFT	\$13.25	Crime Reduction
LST	\$25.61	Drug Reduction
MPP	\$5.29	Drug Reduction
MST	\$2.64	Crime Reduction
MTFC	\$10.88	Crime Reduction
NFP	\$2.88	Crime & Educ

*Washington Institute for Public Policy (2004)

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Benefit-to-Cost Ratios: Selected Promising Programs*

<u>Program</u>	<u>Ratio</u>	<u>Outcome</u>
DARE	\$0.00	None
Boot Camps	\$0.00	None
Head Start	\$0.23	None
Scared Straight	-\$203.51	Increases Crime

*Washington Institute for Public Policy (2004)

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Programs vs. Practice

Evidence Based Programs

Evidence Based Practice

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Blueprints Programs Developmental Progression

	<u>Pregnancy/Infancy</u>	<u>Early Childhood</u>	<u>Elementary</u>	<u>Junior</u>	<u>H.S.</u>
Nurse-Family Partnership	X	X			
Incredible Years		X	X		
Big Brothers Big Sisters			X	X	X
PATHS			X		
Bullying Prevention Project			X	X	
Life Skills Training				X	
Midwestern Prevention Project				X	
Multisystemic Therapy				X	X
Function Family Therapy				X	X
Multi-dimensional Treatment Foster Care				X	X
Toward No Drug Abuse					X

(Thornberry & Mihalic, 2008)

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Blueprints Prevention Approach

	<u>Universal</u>	<u>Selected</u>	<u>Indicated</u>
PATHS	X		
Bullying	X		
LST	X		
MPP	X		
TND	X	X	
Incredible Years		X	X
Nurse Visitation		X	
BBBS		X	
FFT		X	X
MST			X
MTFC			X

(Thornberry & Mihalic, 2008)

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Survey of Louisiana Providers

95 Providers representing 98 programs/services participated in a recent survey of juvenile justice service providers

23 identify their program/service as an evidence-based or promising program (self-report, thus fidelity to a program model was not determined; however, 17 could be cross-referenced with a title on a national list)

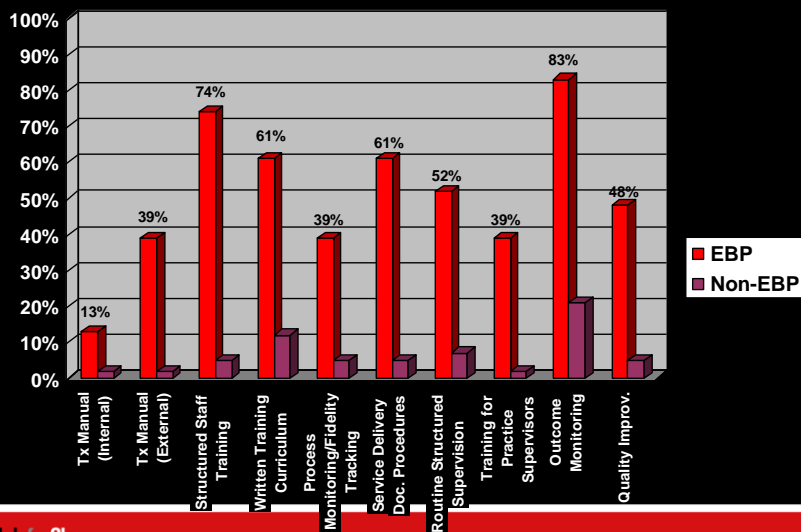
(Phillippi, Cocozza, Shufelt, 2008)

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Louisiana JJ Programs (n=98)

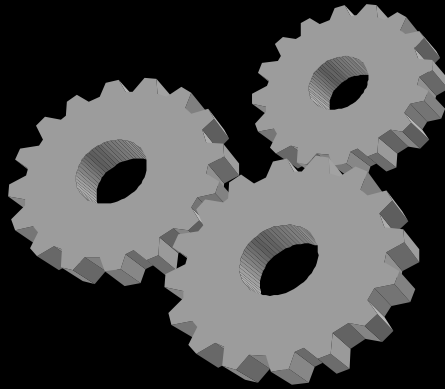
(Phillippi, Cocozza, Shufelt 2008)



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So what are these components?



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Treatment Manuals

A detailed prescription of services, workbooks, procedures, handouts, etc.

(e.g. Cannabis Youth Treatment Series, Seeking Safety, Blueprints, etc.)

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Staff Training

Training of staff is done in a very structured manner, typically utilizing an established curriculum

Staff are trained and/or facilities are licensed to provide a specific intervention

(e.g. MST, FFT, etc.)

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Process monitoring

Monitoring of procedures and delivery of service ensures models are being delivered as prescribed

Provides a means to track fidelity

Service delivery documentation procedures (standardized) Infrastructure reinforces what staff have been trained to do

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Supervision

Staff receive routine, structured supervision of their work

Supervisors are trained in a specific method of supervision that reinforces the model

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Outcome monitoring

Beyond counting outputs (e.g. number of youth in a program, number of assignments completed)

EBPs track system change, behavioral change, symptom reduction, and long-range outcome

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Implementation Quality

Widespread implementation of effective programs is unlikely to affect delinquency or substance abuse unless there is careful attention given to the fidelity and quality of implementation.

(Thornberry & Mihalic, 2008)

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Strategy for Upgrading Quality of Prevention Programs

Whenever possible implement best evidence-based programs

Funding for unproven programs must include evaluation component

Programs evaluated and found ineffective should be discontinued

Sustain and build capacity for evidence-based programs with mainstream funding

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(Thornberry & Mihalic, 2008)

Commonalities Among Effective Programs/Interventions

Sound Theoretical Rationale / focused on Risk Factors

Intervention Programs: Intense, Clinical

Multi-modal and Multi-contextual

Social Competency/Skill Development Strategy

Cognitive/Behavioral Delivery Techniques

Outside Institutional Settings

Capacity for Delivery with Fidelity

(Thornberry & Mihalic, 2008)

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Three Common Practice Components

ECOLOGICAL /
SYSTEMS
APPROACH

MOTIVATION /
ENGAGEMENT

COGNITIVE-
BEHAVIORAL
TREATMENT



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Motivation / Engagement

Treatment failure vs. failure to engage

Stages of change

Client centered, directive method of communication for enhancing motivation o change

Goal directed and rolling with resistance

Eliciting change talk

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Example: Michael enters the juvenile justice system not trusting and not engaged in any of the treatment offered. He reports to his counselor that he doesn't need any help, and just wants to get out of detention.

Traditional engagement. Staff response: "You have to realize that you are not going anywhere, you've broken the law, and you need to look at what you've done wrong so you don't repeat it. You have real problems that we are here to help you work on. You may not like it now, but you'll get used to it, and we'll help you. As long as you cooperate with us, we'll work with you, etc..."

Motivational engagement. Staff response: "So your primary goal sounds like you want to get out of detention. That sounds like a great goal, what kind of ideas do you have to do that?" Youth responds, "I just need to get the judge of my case." Counselor, "that sounds like a good starting point, I've seen a lot of people just like yourself, who have worked with us and been able to go to their judge with reasons to get out of here."

(Phillippi & Schroeder, 2006)

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Cognitive-Behavioral Treatment

Understanding, Predicting, and Changing Behavior

Thinking drives **Feelings** drives **Behavior**

Behavioral analysis (looking for the DRIVER)

Skills teaching

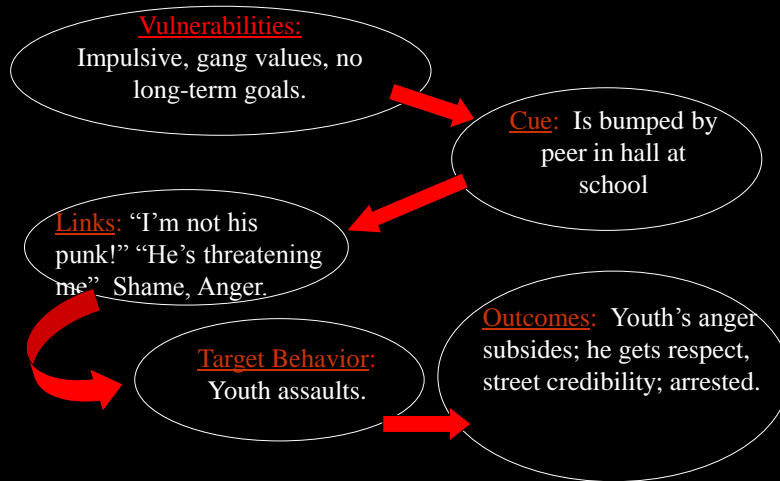
Generalizing to new events

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Behavior Analysis



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Ecological / Systems Approach

CHARACTERISTICS OF ALL SYSTEMS

History

Structure

- **Systems have parts** that make up the whole
- **Systems have subsystems**
- **Boundaries** – the interface/ **point of connection & separation between system parts** & between the system & its environment or other systems (THE FIT)

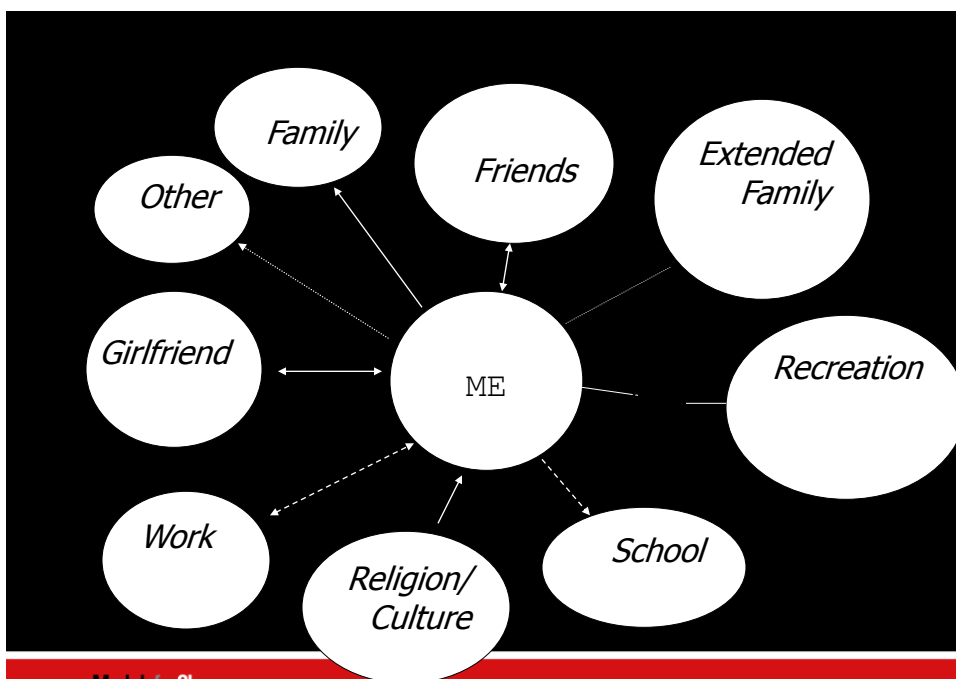
Patterns

- **Repetitive patterns** that reinforce the system's structures
- All systems exist to **SURVIVE**

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Example of Harmful Effects

Dishion et al. (1999)

Randomized Clinical Trial of:

- a. Family Therapy
- b. Family plus Teen Focus Intervention
- c. Control group

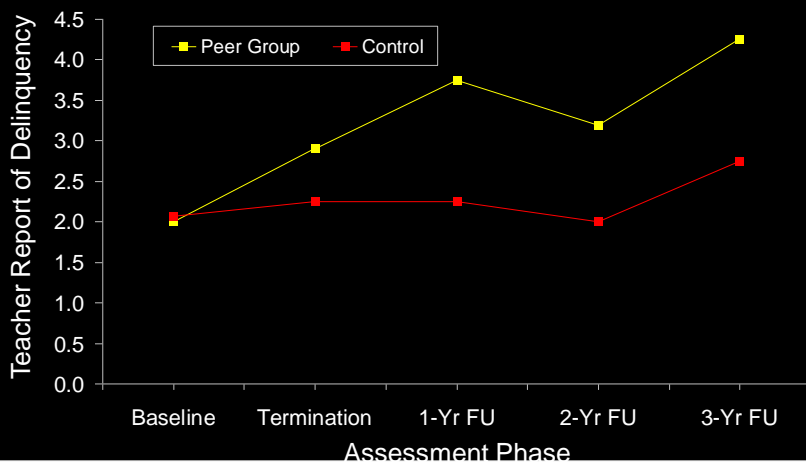
Focus on comparison of b. & c.

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Teacher Report of Delinquency as a Function of the Teen Focus Intervention



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Source: Dishion et al., 1999: Figure 3

Finding the Right Program

- What behavioral outcomes are targeted?
- What risk/protective factors are targeted?
- What are the characteristics of the individual/population to be served ?
- What programs address these risks/protective factors for this population?
- What is the scientific evidence that this/these programs work?
- What is the delivery capability of this/these program(s)?
- What does the program/intervention cost?
- What is necessary for a quality implementation?

(Thornberry & Mihalic, 2008)

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Issues and Barriers

Effectively Implementing EBPs

- Structural issues
- Workforce/Training concerns
- Family involvement and choice

Funding EBPs

- Funding services
- Cost and cost-effectiveness

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EBP Resources

Louisiana State University Health Sciences Center (Community Based EBP Project-
Sponsored by the MacArthur Foundation Models for Change in JJ initiative)
Stephen Phillippi, PhD sphill2@lsuhsc.edu or (504) 234-3899

Blueprints for Violence Prevention <http://www.colorado.edu/cspv/blueprints/>

OJJDP Model Programs Guide <http://ojjdp.ncjrs.org/programs/mpg.html>

SAMHSA Nat'l Registry of Evidence-Based Programs and Services (NREP)
<http://www.modelprograms.samhsa.gov>

Youth Violence: A Report of the Surgeon General
<http://www.surgeongeneral.gov/library/youthviolence/youvioreport.htm>

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