Executive Summary

Problem Statement: Research findings are implemented into social services practices too slowly and inconsistently.

A large gap between research and practice can result in mental health agency interventions lagging the research by 20 years (Invermey & Schuwer, 2013; Fixsen, et al., 2005). (Brooke, 2000).

Impacts:
- Case study example: Poorer outcomes for clients and community
- Increased costs to taxpayers – incarceration much more expensive compared with more cost-effective community solutions

Solutions Development and Impact:
The field of Implementation Science has been used to analyze program root causes, and develop systematic, robust models to move from science to service. (Fixsen, et al., 2005; Fixsen, et al., 2009).

Systematic approach to implementation is critical due to complex environment of federal, state, community, and organizational elements in which agencies operate (Dennan, 2004).

Practice Implications: Intermediaries are increasingly relied upon by providers and policy makers to help navigate the complex, shifting terrain of multilevel systems change (Ireson, et al., 2011).

Policy Implications: Governments are increasingly using implementation science to inform policy and budgetary decisions.

Improved outcomes
- Better outcomes for clients and community
- Better use of taxpayer dollars

Research Question: What actions can agencies take to adopt evidence-based practices for treating juvenile offenders and other clients in a more timely and effective manner?

Methods:
A case study of Nebraska youth over-incarceration was examined within an overall context of juvenile justice reform in Nebraska, and led to the research question.

A literature review was conducted using PSYCHINFO, ProQuest Premium Social Sciences, and AcademicSearchComplete with the following keywords: research to practice gap, translational research, implementation, purveyor; evidence-based practice, dissemination.

Results

New research findings are ready to be implemented - how to accomplish this better and faster

The cycle continues as new research evolves

Evidence-Based Policymaking is used to:
- Reduce wasteful spending
- Expand innovative programs
- Strengthen accountability

The Pew-MacArthur Results First Initiative works with state and local governments to implement cost-benefit analyses to support budget and policy decisions. Pew-MacArthur recognized implementation support centers’ role to ensure program investment benefits are realized (Pew-MacArthur, 2017).

During 2012 and 2013, Iowa, Massachusetts, New York, and Vermont have used the Results First model to target $1 million in funding to more effective programs that the model showed could afford higher returns.

Currently, 23 states and 8 counties are participating in Pew-MacArthur’s Results First Initiative (Pew-MacArthur, 2017).

Better Outcomes: effectively-implanted programs had 2 to 3 times greater mean effect sizes compared with programs not as effectively implemented, according to 5 meta-analyses covering nearly 500 studies (Fixsen, et al., 2009).

Better Use of Taxpayer Dollars: Washington State Institute for Public Policy (WSIPP) conducted cost-benefit analyses of the Functional Family Therapy program, and found, for each dollar spent: $10.69 in benefits (saved/benefits avoided) when delivered with fidelity to the program model.

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A Case Study of Effective Implementation: The New York City Experience

In 2011, the New York City Administration for Children’s Services (ACS) implemented the largest, most diverse continuum of evidence-based and evidence-informed preventative programs in any child welfare jurisdiction in the U.S., and leveraged an implementation science framework as an integral part of the initiative.

ACS is responsible for child protection, child welfare, juvenile justice, and early childhood care and education services in New York City, through a network of more than 75 contract agencies and approximately 7,000 employees.

Preliminary results reflect ACS implementation of preventative Evidence Based Methods are positively impacting families:
- More families are being served each year per paid contract slot, due to EBPs’ shorter length of service
- High-risk families’ outcomes are improved compared with ACS traditional models
- Higher case goal achievement for closed cases
- Improved collaboration between the ACS Division of Child Protection and its contracted providers
- Decrease in the number of indicated investigations

References

Complete references are available in separate handout

Acknowledgements

Thanks to Dr. Peter Sitzo for his expert mentoring and support. Thanks also to Dr. Jeannette Harder, Director of UNO’s Support and Training for Evaluation of Programs (STEPs), and Pam Ashley, Tova Heretinger, and Natalie Scarpa, also from STEP, for encouragement and advice.

Conclusions

- Evidence-based programs can fully reach community members only if they are administered with fidelity.
- Agency practitioners operate within complex environments, making policy changes challenging to execute and maintain.
- Policy changes are well supported when practitioners use structured, robust methods of implementation science.
- Implementation centers and other intermediaries have demonstrated success in connecting research to practice through implementation science, and offer valuable solutions to achieve positive community outcomes in cost-effective ways.
- State and local governments, and funders, can execute their responsibility to administer taxpayer and donor funds wisely by requiring agencies to select and implement evidence-based treatments using proven methods that leverage implementation science.

Danielle Galvin, MSW/MPA student
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