

COALITION FOR EVIDENCE-BASED POLICY

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Jon Baron

jbaron@excelgov.org
202-530-3279

1301 K Street, NW

Suite 450 West

Washington, DC 20005

202-728-0418

FAX 202-728-0422

www.excelgov.org/evidence

The Coalition's Purpose and Agenda

The Coalition for Evidence-Based Policy is a nonprofit, nonpartisan organization whose mission is to promote government policymaking based on rigorous evidence of program effectiveness. In the field of medicine, public policies based on rigorous evidence have produced extraordinary advances in health over the past 50 years. By contrast, in most areas of social policy – such as education, poverty reduction, crime and justice, and substance-abuse prevention – government programs often are implemented with little regard to evidence, costing billions of dollars yet failing to address critical needs of our society. However, rigorous studies have identified a *few* highly-effective social interventions, suggesting that a concerted government strategy to build the number of these proven interventions, and spur their widespread use, could bring rapid progress to social policy similar to that which transformed medicine.

Since the Coalition's founding in 2001, our work with top Congressional and Executive Branch policymakers has resulted in important evidence-based reforms – including key reforms in the Office of Management and Budget's (OMB) process for assessing the performance of federal programs government-wide, and sizeable increases in Congressional funding for rigorous research and evidence-based programs in education, crime prevention, and other areas. A recent independent evaluation of our work, conducted for the William T. Grant Foundation, found that the Coalition has been “instrumental in transforming a theoretical advocacy of evidence-based policy among certain [federal] agencies into an operational reality.”

The problem we seek to address: Social programs are often implemented with little regard to rigorous evidence, resulting in weak or no progress. For example:

- **In K-12 education**, a vast number of interventions – such as new math, whole language reading instruction, “effective” schools, and the self-esteem movement – have gone in or out of practice over time with little regard to rigorous evidence. Meanwhile, the U.S. has made very limited progress in raising K-12 achievement since the 1970s, according to the respected National Assessment of Educational Progress long-term trend.
- **In substance-abuse prevention**, the nation's most widely-used program – DARE, operating in 75% of school districts – has been found ineffective in randomized controlled trials. Meanwhile, government data show that adolescent use of drugs or alcohol, despite a recent decrease, now stands at about the same level as in 1990. (DARE is now being re-designed by the DARE organization).
- **In poverty reduction**, government assistance programs for low-income Americans contain very few interventions shown in rigorous studies to be effective in reducing poverty. Meanwhile, the official U.S. poverty rate now stands at 12.3% – slightly *higher* than it stood in 1973 – and 36 million Americans remain below the poverty line.

The opportunity: Rigorous studies – including the “gold standard” randomized controlled trial – may offer a key to sustained progress in social policy. Specifically:

- A. Randomized controlled trials have identified a *few* highly-effective social interventions.** Although rare, the very existence of these research-proven interventions suggests that a concerted government effort to build the number of such interventions, and spur their widespread use, could fundamentally improve life outcomes for millions of Americans. Illustrative examples include:
 - **Nurse-Family Partnership** – a nurse visitation program for low-income women during pregnancy and children's infancy (at 15-year follow-up, produced a 40-70% decrease in child abuse/neglect, and arrests/convictions of children and mothers, compared to controls).

- **Check and Connect** – a dropout prevention program for high school students with learning, emotional, or behavioral disabilities (at 4-year follow-up, produced a 40% increase in students staying enrolled in or graduating from high school, compared to controls).
- **Portland JOBS Training Program** – to move welfare recipients into high-quality, stable jobs through short-term job search and training activities (at 5-year follow-up, increased employment and earnings, and decreased welfare receipt, by 20-25% compared to controls).

Such examples of proven effectiveness are rare because rigorous studies, such as well-designed randomized controlled trials, are uncommon in most areas of social policy. Meanwhile, careful investigations show that the less-rigorous studies that *are* often used can produce erroneous conclusions and lead to practices that are ineffective or harmful.

- B. The precedent from medicine: rigorous evidence – particularly the randomized controlled trial – has produced remarkable advances.** In medicine, randomized controlled trials have provided the conclusive evidence of effectiveness for most of the major medical advances over the past 50 years, including: (i) vaccines for polio, measles, and hepatitis B; (ii) interventions for hypertension and high cholesterol, which in turn have helped bring about a decrease in coronary heart disease and stroke by more than 50% over the past half-century; and (iii) cancer treatments that have dramatically improved survival rates from leukemia, Hodgkin’s disease, breast cancer, and many other cancers.

Our Coalition therefore seeks to advance a major federal strategy to:

- (i) **Fund rigorous studies – particularly randomized controlled trials – to build the number of social interventions proven to produce sizeable, sustained benefits to participants and/or society; and**
- (ii) **Provide strong incentives and assistance for federal funding recipients to adopt such proven interventions, and put them into widespread use.**

Our recent work with top federal policymakers to advance this strategy is resulting in important, concrete evidence-based reforms. For example:

- **Our work with Congress and OMB helped create a new \$10 million evidence-based home visitation program in the FY 08 Appropriations Act (Public Law 110-161).** This program will provide seed money to scale up research-proven models such as the Nurse Family Partnership, above. We helped support the development of this program by OMB, and then worked with the Appropriations Committees to help gain funding and ensure a focus on research-proven models.
- **Our work with OMB led to key reforms in OMB’s process for assessing the performance of federal programs government-wide** – reforms that incorporate our recommended criteria for what constitutes strong evidence of effectiveness. We believe this is a major step forward, given OMB’s government-wide responsibility for assessing program performance and developing the President’s budget.
- **Our work with Congress has yielded important increases in Congressional support for randomized controlled trials in education, crime prevention, and other areas.** For example, we’ve helped obtain substantial increases in Congressional funding for rigorous education research over the past five years, and a strong Congressional endorsement of randomized controlled trials in education.
- **We operate an Evidence-Based Policy “Help Desk” for OMB and the federal agencies (www.evidencebasedpolicy.org).** The Help Desk seeks to supply a critical missing piece needed to turn the concept of evidence-based policy into a practical reality – namely clear, easy-to-use resources that OMB and the federal agencies can use to advance (i) rigorous evaluations and (ii) the effective use of rigorous evidence to improve program performance.
- **The Coalition’s *Social Programs that Work* website (www.evidencebasedprograms.org) has emerged as one of the leading U.S. websites of evidence-based programs.** It attracts an average of 180 different visitors per day and has a Google ranking of 5 (out of 10), making it one of the most frequently-visited “what works” sites on the web.