

March 6, 2009

Board of Advisors

MEMORANDUM

TO: Board of Advisors of the Coalition for Evidence-Based Policy
FROM: Jon Baron
RE: Update on our work

I'm happy to report significant advances in our efforts to promote evidence-based reforms in government programs. Below is a brief summary for your review. Any thoughts or advice you have would be much appreciated.

1. President Obama's budget released Thursday includes a major new initiative (\$8.6 billion over ten years) to scale up the Nurse-Family Partnership (NFP) -- an effort we played a key role in advancing.

Proposed funding for the coming year (FY10) is \$87 million. As you'll recall, we worked very closely with OMB officials and staff to validate NFP as unique in having strong evidence of large, sustained effects. Also, Coalition Board member Jonathan Crane, while on sabbatical last year to work for Obama, helped incorporate this initiative into the proposed domestic policy agenda.

As background on NFP: This past fall, the Coalition's Top Tier Evidence initiative identified NFP -- a nurse home visitation program for low-income women during their pregnancy and children's infancy -- as one of only two programs for children age 0-6 currently meeting the Top Tier evidence standard. This was based, for example, on findings at the 15-year follow-up of 40-70% reductions in child abuse/neglect, and arrests/convictions of children and mothers, compared to a randomized control group (see evidence summary [here](#)).

2. The FY09 Appropriations bill increases funding for HHS's evidence-based home visitation program -- a program we helped OMB and Congress establish last year.

The bill, which Congress is expected to enact shortly, increases funding to \$13.5 million in FY09, compared with about \$10 million in FY08. Importantly, the bill reaffirms the program's high evidentiary standard, developed with our input: HHS "shall ensure that these funds support models that have been shown in well-designed randomized controlled trials to produce sizeable, sustained effects on important child outcomes such as reductions in child abuse and neglect." The bill also directs HHS's Assistant Secretary for Planning and Evaluation, in consultation with OMB, to help ensure program adherence to this rigorous standard.

3. The newly-enacted Stimulus Bill greatly expands the Institute of Education Sciences' (IES) Statewide Data Systems program, which Congress began funding at IES in FY05 with our input.

In FY08, funding was \$48 million. The Stimulus Bill scales it up to \$250 million. As you'll recall, at the start of this program we provided input to the Appropriations Committees emphasizing (i) the value of such data systems in enabling many states -- for the first time-- to collect longitudinal data on individual student achievement, so as to facilitate randomized controlled trials and other rigorous longitudinal studies; and (ii) the importance of having

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a research-capable organization such as IES administer the program. Our input helped inform the key Congressional decision in 2005 to designate IES as the lead agency for this program, and to begin providing funding.

4. The Stimulus Bill also includes a major rigorous evaluation of teacher performance pay, using model evaluation language we've urged Congress to apply to education programs.

Specifically, the Stimulus Bill provides \$200 million to the Department of Education for performance-based teacher and principal pay systems, and directs "that a portion of these funds shall also be used for a rigorous national evaluation by the Institute of Education Sciences, utilizing randomized controlled methodology to the extent feasible" to assess the impact of such systems. This language follows the recommended model that we developed with the Appropriations Committees and with the National Board for Education Sciences in 2006 - - namely, that IES should be the lead agency within the Department for Congressionally-authorized evaluations, and that such evaluations should use random assignment wherever feasible.

5. Our new initiative to identify social Interventions meeting "Top Tier" evidence of effectiveness has identified two additional interventions meeting the Top Tier standard.

You may recall that the initiative's expert Advisory Panel, at its previous meeting (October 2008), considered interventions for children age 0-6. Of the 46 interventions nominated for consideration or listed in the strongest evidence category on one of the major websites of evidence-based programs, the Panel identified two as currently meeting the Top Tier standard -- the Nurse Family Partnership and Success for All (see results [here](#)).

At the Panel's February 2009 meeting, it began considering interventions for children and youth ages 7-18. The Panel identified two interventions in this new area as meeting the Top Tier evidence standard. These decisions will be publicly released shortly. We expect that, at future meetings, the Panel will identify several other interventions in this age range that meet the Top Tier standard.

An important aspect of this initiative is that Congress has expressed interest in it, and officially asked GAO to monitor and assess our effort, and report on its validity. If GAO's review is favorable, the project is well-positioned to become a uniquely authoritative -- and potentially pivotal -- resource for Congressional, federal agency, and state and local policymakers in identifying Top Tier social interventions.