

**Board of Advisors**

July 15, 2014

**MEMORANDUM**

RE: Announcing Winners of the Coalition's Low-Cost RCT Competition

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Last fall, our organization – the nonprofit, nonpartisan [Coalition for Evidence-Based Policy](#) – launched a competition to select and fund low-cost randomized controlled trials (RCTs) in areas of high policy importance, with the goal of demonstrating the feasibility and value of such studies to a wide policy, philanthropic, and research audience. The competition (summarized at the bottom of this email) generated a great amount of interest, attracting over 50 submissions from applicants that included some of the top social policy researchers in the country.

**Today, we're pleased to announce the competition winners – which are also featured in an excellent article in [today's New York Times](#) and discussed in a recent piece on the [White House OSTP website](#):**

- **A large, multi-site RCT of Bottom Line, a program that provides one-on-one guidance to help low-income, first-generation students get into and graduate from college.** This study will measure college enrollment, persistence, and completion outcomes for a sample of nearly 1,400 students over a seven-year period, using administrative data from the National Student Clearinghouse. The study cost is \$159,000. ([Link](#) to brief study summary.)
- **A large RCT of Durham Connects, a postnatal nurse home visiting program designed to improve child and mother health and well-being.** The study will use hospital administrative records to measure program impacts on families' emergency department use and related healthcare costs through child age 24-months, for a sample of about 1,100 families in Durham County, North Carolina. The study cost is \$183,000. ([Link](#) to brief study summary.)
- **A large, multi-site RCT of workplace health and safety inspections conducted by the federal Occupational Safety and Health Administration (OSHA).** For a sample of about 29,000 business establishments eligible for a randomized inspection, the study will test whether being randomly chosen for inspection affects establishments' subsequent injury rates and business outcomes (e.g., sales, business closures) over a multi-year period – all measured through administrative data from OSHA and other sources. The study cost is \$153,000. ([Link](#) to brief study summary.)

**The competition also selected two finalists that were rated highly but which we are unable to fund** – a 78-county RCT of Minnesota's results-focused performance measurement system in welfare-to-work ([link](#) to brief summary) and a large RCT of Safe Families for Children, a child abuse and placement prevention program ([link](#)). We'll continue to keep you posted on this initiative, and would also welcome any thoughts or suggestions. A request for proposals for the competition's second year will be released in December on the Coalition's website.

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**Robert Hoyt**  
Jennison Associates

**David Kessler**  
Former FDA Commissioner

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## **About the Competition:** **Demonstrating How Low-Cost Randomized Controlled Trials Can Drive Effective Social Spending**

In response to the White House and Office of Management and Budget (OMB) [call to action](#) for evidence-based reforms across the federal government, the Coalition launched the competition in December 2013 as a high-visibility, three-year initiative designed to demonstrate an important new development in the effort to build credible evidence about “what works” in social spending: Low-cost RCTs.

**Background: Well-conducted RCTs are regarded as the strongest, most credible method of evaluating the effectiveness of programs, practices, and treatments (“interventions”)**, per evidence standards articulated by the Institute of Education Sciences (IES) and National Science Foundation (NSF), National Academy of Sciences, Congressional Budget Office, U.S. Preventive Services Task Force, Food and Drug Administration, and other respected scientific bodies.

**New Paradigm: Large RCTs, once perceived as inherently too expensive for practical use in most areas, can now be conducted in many instances at low cost.** Costs are reduced primarily by measuring key outcomes using administrative data already collected for other purposes (e.g., student test scores, criminal arrest records, hospitalization records), rather than engaging in original, and often costly, data collection. A recent Coalition policy [brief](#) provides five examples of sizable, well-conducted RCTs that cost just \$50,000 to \$300,000 – a fraction of the usual, multimillion-dollar cost – yet produced valid evidence of practical importance for policy decisions.

**Why It Matters: This could enable hundreds of social interventions to be tested in large RCTs each year – compared to a relative few – so as to rapidly build the number proven to work.**

**The Competition: A three-year effort, the competition will select and fund a total of 7-9 low-cost RCTs (2-3 each year).** The goal is to demonstrate the feasibility and value of such studies to a wide audience. Additional information on the competition is [linked here](#).