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Proposal: An Executive Order To Institutionalize Evidence-Based Approaches in Federal Social Programs

Key To Reviving Stalled Progress in Poverty Reduction, K-12 Education, Other Areas

This paper proposes a government-wide initiative, coordinated by the Office of Management and Budget (OMB), to strengthen the effectiveness of federal social programs by –

- (i) Building a body of research-proven program models/strategies; and
- (ii) Incentivizing the widespread adoption of such models/strategies by program grantees at the state and local level.

We propose that this initiative be launched through an Executive Order or similar directive, creating an institutional mechanism to incorporate these concepts in social programs across the government.

The Problem: Federal social programs, set up to address important U.S. problems, often fall short by funding specific models/strategies (“interventions”) that are not effective. When evaluated in scientifically rigorous studies, government-funded social interventions – such as K-12 educational curricula, job training projects, crime prevention efforts, and case-management assistance for low-income families – are frequently found to be ineffective or marginally effective. Those interventions found to produce sizeable, sustained effects on important life outcomes – such as educational achievement, teen pregnancy, criminal arrests, and employment – tend to be the exception. This pattern occurs in many diverse areas of social policy, as well as other fields where rigorous studies have been conducted – for example, medicine and psychology.

Why It Matters: Improving social programs is critically needed. The United States has failed to make significant progress in key areas such as –

- **Poverty reduction:** The U.S. poverty rate is now 12.5% – slightly *higher* than in 1973.
- **K-12 education:** The U.S. has made very limited progress in raising K-12 achievement since the 1970s, or in closing the achievement gap between minority and white students since the 1980s, according to the respected National Assessment of Educational Progress long-term trend.
- **Substance-abuse prevention:** Government data show that adolescent use of drugs or alcohol (despite a recent decrease) now stands at approximately the same level as in 1990.

The Opportunity: Rigorous studies have identified a few highly-effective social interventions. Approximately 10-15 interventions now exist that are backed by strong evidence of effectiveness – i.e., well-conducted randomized controlled trials, carried out in typical community settings, showing sizeable, sustained effects on important life outcomes. 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 the control group).
- **Carrera Adolescent Pregnancy Prevention Program** – a youth development program for low-income teens (at age 17, reduced girls’ pregnancies/births by 40-50%, versus control group).
- **Career Academies** – Small learning communities in low-income high schools, offering academic and technical/career courses as well as workplace opportunities (8 years after high school, increased average earnings by \$2200 per year, compared to the control group).

- **Success for All in grades K-2** – School-wide reform, primarily for high-poverty schools, with a strong focus on reading instruction (3 years after program start, increased school-wide reading achievement in 2nd grade by 25-30% of a grade level, compared to the control group).

Although rare, the very existence of these proven interventions suggests that a concerted effort to grow the number of such interventions, and incentivize their adoption by grantees of federal programs, could greatly increase the effectiveness of such programs in improving people’s lives.

Specific Proposal: An Executive Order (or similar directive) charging OMB and the Agencies to collaborate in advancing two well-defined evidence-based reforms in appropriate program areas:

- (i) **Grow the body of research-proven interventions by increasing the number of rigorous – preferably randomized – evaluations used to assess intervention impact (including cost); and**
- (ii) **Spur the widespread use of existing research-proven interventions that produce sizeable, sustained benefits (relative to cost), by incentivizing program grantees at the state/local level to implement them effectively.**

- **The directive would authorize OMB’s use of various policy tools to advance these reforms,** while giving flexibility to OMB’s Resource Management Offices and the Agencies about which tools to use in which program areas. For example, the directive might provide that –
 - (i) Agency programs include a specific plan for advancing the above reforms as part of the Agency’s budget submission to OMB each year;
 - (ii) OMB and the Agencies work together to systematically incorporate such reforms into legislation that OMB and the Agencies are developing and/or reviewing;
 - (iii) OMB and the Agencies review programs’ progress in advancing these reforms as part of OMB hearings with Agency officials/staff, quarterly assessments, and similar venues; and
 - (iv) OMB review Agencies’ plans to spend research, evaluation, and other “national activities” funds, to ensure they are appropriately focused on the above reforms, before approving apportionment of the funds.
- **OMB and the Agencies would be encouraged to collaborate in developing innovative approaches to advance the above reforms.** An illustrative example is OMB-HHS collaboration in developing the welfare “demonstration waiver” policy in the 1980s and 90s. Under this policy, HHS waived certain provisions of federal law to allow states to test new welfare reforms, but only if the states agreed to evaluate their reforms in randomized controlled trials. This policy resulted in over 20 large randomized controlled trials that produced valid, actionable knowledge about “what works” in moving people from welfare to work, and had a major impact on state and national welfare policy.

Relationship To Government Accountability Initiatives (e.g., GPRA, PART): We believe the above initiative would supply a critical missing piece needed for such efforts to work properly. The Government Performance and Results Act (GPRA) and Program Assessment Rating Tool (PART) both seek to hold Agency programs accountable for meeting performance goals. Yet most programs are missing a critical piece needed to achieve such goals: scientifically-valid knowledge about which interventions they fund, or potentially could fund, are truly effective and which are not. This leaves programs with the mandate to improve performance, but few research-proven strategies they can use to meet that mandate. The initiative outlined above, by growing the body of proven strategies, would give Agency programs the tools they need to succeed.

Conclusion: The above initiative could – for the first time – spark evidence-driven improvements in major social programs, leading to rapid progress in education, poverty reduction, crime and substance-abuse prevention, housing, and other areas that affect the lives of millions of Americans.