Coalition for Evidence-Based Policy
A NONPROFIT, NONPARTISAN ORGANIZATION

AMERICA ACHIEVES

February 12, 2013

Honorable Arne Duncan
Secretary of Education
U.S. Department of Education
Washington, DC 20202

Re: Proposed Amendments to Education Department General Administrative Regulations (EDGAR), Docket ID ED-2012-OII-0026

Dear Secretary Duncan:

The Coalition for Evidence-Based Policy and America Achieves strongly agree with the Department of Education's proposed amendments to EDGAR to advance the development and use of rigorous evidence of program effectiveness in Department grant programs. We are particularly supportive of:

- The provisions of §75.210 designed to promote evaluation methods meeting What Works Clearinghouse standards, so as to build credible evidence about the effectiveness of Department-funded grant projects; and

- The provisions of §75.266 and §77.1 enabling Department programs to focus funds on projects and strategies backed by credible evidence.

These provisions will be a major step toward institutionalizing the use of evidence to increase program effectiveness, which is largely unprecedented in federal social spending. Congratulations on this pioneering effort.

We have one suggested revision which, although in the nature of refinement, may be critical to the effort's success.

Suggestion: ***That the definition of "strong evidence of effectiveness" in §77.1 incorporate the Investing in Innovation Fund's (i3) requirement for effects that are "substantial and important" and not just statistically significant.***

Reasons for this suggestion:

Under the definition as currently drafted, programs could qualify as having strong evidence solely on the basis of statistically-significant effects, even if those effects are –

(i) On trivial outcomes;
(ii) So small in size as to be of little practical importance; or
(iii) Likely to be chance findings (e.g., because the studies measured a large number of outcomes).

Similar definitions, set out in Congress' authorization of HHS's Maternal, Infant, and Early Childhood Home Visiting Program in 2010, opened a substantial loophole. In that program, a number of the home visiting program models identified by HHS as "evidence-based" under the Congressional language are backed by randomized controlled trials showing statistically-significant effects that are of little practical or policy importance.

As illustrative examples:

- The Healthy Steps home visiting model qualified as "evidence-based" based on very small, short-term effects, such as a statistically-significant increase in the percent of mothers bringing their child for a doctor visit at one month of age from 95% (for the control group), to 97% (for the treatment group). The effects, found in a well-conducted randomized trial, reached statistical significance only because the trial had a very large sample. Meanwhile, the trial found no effects on any of the more final, policy-important outcomes that it measured (e.g., child behavior, development, social skills, and health/safety at age 5-6).[1]

- The Parents as Teachers home visiting model qualified as "evidence-based" based on four randomized trials that, as described in HHS's evidence review, measured a total of 208 outcomes and found (i) 5 statistically-significant positive effects (e.g., on child competence in playing with a new toy); and (ii) 6 statistically-significant adverse effects (e.g., on mothers' acceptance of child behavior).[2] Such effects – both the positive and adverse – could easily have appeared by chance given the large number of outcomes measured.[3] Thus, a reasonable interpretation of these findings is that the program produced no important effects one way or the other.

Under the EDGAR definitions, as currently drafted, both of these examples would similarly qualify as "strong evidence of effectiveness" – even though the programs did not produce any important effects.

Proposed language:

EDGAR could adopt the i3 language requiring effects that are "substantial and important" and not just statistically significant.

> Specifically, i3's criteria for Scale-up Grants and Validation Grants state that, "*In determining the strength of the existing research evidence, the Secretary considers … [T]he extent to which the eligible applicant demonstrates that there is strong evidence [or, for Validation grants, moderate evidence] … that its implementation of the proposed practice, strategy, or program will have a statistically significant, substantial, and important effect on improving student achievement or student growth, closing achievement gaps, decreasing dropout rates, increasing high school graduation rates, or increasing college enrollment and completion rates.*"

In other words, i3's evidence criteria require effects that are of policy and practical importance – and thus avoid the loophole in HHS home visiting's statutory language that has allowed programs without such effects to be classified as evidence-based.

Thank you for your consideration of our comments on the Department's ground-breaking effort to advance evidence-based criteria in its grant-making regulations.

Sincerely,

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Jon Baron
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References

[1] Minkovitz, C., Strobino, D., Hughart, N., Scharfstein, D., Guyer, B., & Healthy Steps Evaluation Team (2001). Early effects of the Healthy Steps for Young Children Program. *Archives of Pediatrics & Adolescent Medicine, 155*(4), 470–479. Guyer, B., Barth, M., Bishai, D., Caughy, M., Clark, B., Burkom, D., Tang, C. (2003). The Healthy Steps for Young Children Program National Evaluation. Baltimore: Women's and Children's Health Policy Center, Department of Population and Family Health Sciences, Johns Hopkins Bloomberg School of Public Health. Minkovitz, C. S., Strobino, D., Mistry, K. B., Scharfstein, D. O., Grason, H., Hou, W., Guyer, B. (2007). Healthy Steps for Young Children: Sustained results at 5.5 years. *Pediatrics, 120*(3), 658–668.

[2] Wagner, M., Cameto, R., & Gerlach-Downie, S. (1996). Intervention in support of adolescent parents and their children: A final report on the Teen Parents as Teachers Demonstration. Menlo Park, CA: SRI International. Wagner, M., Clayton, S., Gerlach-Downie, S., & McElroy, M. (1999). An evaluation of the northern California Parents as Teachers demonstration. Menlo Park, CA: SRI International. Wagner, M., & Spiker, D. (2001). Experiences and outcomes for children and families: Multisite Parents as Teachers evaluation. Menlo Park, CA: SRI International. Drotar, D., Robinson, J., Jeavons, L., & Lester Kirchner, H. (2009). A randomized, controlled evaluation of early intervention: The Born to Learn curriculum. Child: Care, Health & Development, 35(5), 643–649.

[3] By design, each test for statistical significance has a 1 in 20 chance of giving a false positive answer – i.e., of finding a statistically-significant positive effect that is due to chance rather than a true program impact. Since the study measured 208 outcomes, it would be expected to produce approximately 10 such chance findings on average.