

Methodological Considerations for Studies Conducting Research with Participants Receiving Integrated or Linked Services: Evaluation of *Project LAUNCH*

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Project LAUNCH



- Created by the Substance Abuse and Mental Health Services Administration (SAMHSA) to promote the health and wellness of young children ages birth to 8 years of age
- Implemented through grants to states/tribes, who pass the majority of the funding to an identified community (high-risk)
- Grants support systems coordination and development and enhancement of services to support child wellness
- Seeks to reduce risk factors and increase protective factors for healthy child development

Project LAUNCH



 Service activities intended to support child development through multiple portals

Family development

 Home visiting and family support programs, especially focused on supporting child and parent mental and behavioral health

Workforce development

- Consultation services for early childhood care providers, primary care providers, other service providers: promote understanding of socio-emotional development, of how to identify child mental and behavioral health problems, appropriate referrals, how to create home and care environments that promote mental and behavioral health
- ✓ Training on developmental screening/assessments for socio-emotional development

Systems development

Coordinated assessments/referrals across services

New paradigm in early childhood interventions: place-based initiatives



- Moving away from supporting a single intervention
- Policy need for initiatives with greater *reach* into community
 - Examples: LAUNCH, California Endowment, First 5 LA
- Assumption that change for large population of at-risk children in a community requires multiple strategies working together at the community

Evaluating effects of community initiatives on children



- What is the effect of Project LAUNCH on the overall development and wellness of young children in the community, including
 - Increased numbers of children reaching physical, social, emotional, behavioral, and cognitive developmental milestones
 - Increased numbers of children entering school ready to learn (including physical, social, emotional, behavioral, and cognitive readiness)
 - Decreased numbers of children experiencing adverse outcomes (abuse/neglect/removal from home/behavioral health problems)
- Questions are about changes in community-level indicators of child health and well-being rather than changes for specific children or families receiving specific interventions or programs

Evaluating effects of community initiatives on workforce



Other evaluation questions address about intermediate outcomes for providers:

Have providers increased their knowledge about children's socio-emotional development?

Have providers changed their practice in terms of use of developmental screening/assessment, referrals of children with mental or behavioral health concerns?

Evaluation designs



- Research questions addressed by studies such as interrupted time series:
 - Is there a change or "interruption" in baseline trend at the point in the time series when the initiative is implemented?
- Importance of comparison to understand historic changes in trend line not affected by initiative, e.g., events occurring concurrently with initiative

Methodological challenges



- Identifying population-level outcomes that are
 - Valid for the services being implemented under the initiative
 - Available for multiple years prior to initiative
 - Measuring in other communities that are appropriate comparisons
 - If based on extant data, data can be disaggregated to match definition of target community
- High premium on existing state or community databases for these outcomes

Methodological challenges: identifying indicators



- Population indicators for child outcomes need to be measured universally, e.g., community-wide
- Appropriate outcomes depend on services being implemented and their hypothesized effects. For example,
 - Birth outcomes
 - Child abuse/neglect
 - School readiness (e.g., kindergarten readiness tests)
 - Academic achievement (e.g., 3rd grade state tests)
 - Expulsion from preschool

Methodological challenges: identifying comparisons



- Randomization of communities to initiatives highly unlikely
- Need to identify appropriate comparisons, for example:
 - Similar communities matched on demographics, baseline level of targeted child outcomes, proximity to LAUNCH community
 - Schools where children from LAUNCH community and children from non-LAUNCH communities

Methodological challenges: low power



- Site-based initiatives typically are implemented in a small number of communities, if not a single community
- Power of impact studies severely reduced
 - Selecting multiple comparisons rather than a single comparison increases power
 - Multiple baseline years rather than a single pre-test measurement increases power

Methodological challenges: interpreting evidence on population indicators



- Most indicators that can be calculated from existing data are not well-aligned with hypothesized outcomes
 - No existing databases in most communities that measure universal child development outcomes, with exception of birth outcomes and 3rd grade state achievement tests
 - Need for outcomes at age 3, since this is often pivotal age targeted by early childhood initiatives
- Difficult to conclude that initiative is/is not effective if outcomes are not well-aligned
- Hard to move population-level indicators

Questions



- If site-based initiatives are a likely strategy for now, how can we develop an evaluation methodology that is aligned with this programmatic design and provides valid answers?
- Will funders be content with evidence of intermediate outcomes such as changes in workforce, provider practices, if evidence of changes in child outcomes cannot be obtained?