

## *Raising the Bar Project - Valley Nonprofit Resources*

### **EVIDENCE-BASED PRACTICES: FREQUENTLY ASKED QUESTIONS**

#### **▶ What are evidence-based practices?**

Evidence-based practices (EBPs) are interventions for which there is solid and consistent scientific evidence showing that they improve outcomes for consumers of mental health services and their families. A practice generally becomes evidence-based after several research studies using a randomized trials approach have been completed, showing that the EBP provides better outcomes than alternative practices, or no intervention at all. Often a number of studies are examined together through a meta-analysis, helping to strengthen the case that the EBP is effective.

Lower levels of scientific evidence, such as quasi-experimental studies, open clinical trials, clinical observations and expert opinions may be used to determine that a practice is evidence-based, or they may help to identify the intervention as a “promising practice” or an “emerging best practice.” For some interventions, essentially no scientific research exists on consumer outcomes, and validation relies heavily on expert opinion.

#### **▶ Why implement evidence-based practices?**

The President’s New Freedom Commission on Mental Health calls for a “more effective system to identify, disseminate and apply proven treatments or evidence-based practices to mental health care” Earlier, the 1999 Report of the Surgeon General on Mental Health drew attention to the extensive research base on interventions that have proven effective for treating the mental disorders of adults, adolescents and children, and the need to translate cutting-edge research into practice, replacing outdated and ineffective existing practices with interventions grounded in science and proven efficacy.

#### **▶ What are some evidence-based practices in mental health services?**

The Substance Abuse and Mental Health Services Administration (SAMHSA) has identified nine EBPs for which implementation resource kits are being developed and refined. The topics covered are: Medication Management, Illness Management and Recovery, Assertive Community Treatment, Family Psychoeducation, Supported Employment, Co-Occurring Disorders, Services for Older Adults, Consumer Operated Service Programs and Supportive Housing. Information about these kits, and other information about SAMHSA’s work on EBPs, is available at [www.samhsa.gov](http://www.samhsa.gov).

▶ **What are some of the challenges to implementation?**

Even when policy makers and agency directors agree to implement evidence-based practices, doing so has many challenges. Research makes clear that in all too many cases, implementation in new settings is done poorly, with predictably poor results. And other research shows that evidence-based interventions do not improve outcomes unless they are implemented properly.

Committing to use an evidence-based practice is not enough to ensure improved outcomes for consumers and families. All those involved with implementation need to commit to doing what it takes to achieve high-quality implementation of that practice, or its chances for success will be greatly compromised. As a key part of that process, the practice must be implemented with as much fidelity to the original developer-defined model as possible, following the procedures laid out by the developer (including use of a fidelity instrument if there is one). At the same time, some adaptations may be required, to meet local needs or to make the EBP usable with a particular population, for instance translation into other languages and cultures.

▶ **What is evidence-based implementation?**

Because there has been a good deal of research on how to implement EBPs (see [www.nirn.org](http://www.nirn.org) for a summary), “evidence-based implementation” is now possible. For example, research shows that high-quality implementation requires finding the financial and human resources to install the practice correctly. It also means dealing with needed actions in the community that increase readiness for the changes that installing the EBP will require. And it means planning ahead for the longer-term sustainability of the new practice.

*The **Raising the Bar Project** provides information and technical assistance to mental health agencies in the San Fernando Valley about implementation of evidence-based interventions for improving mental health services, primarily focused on increasing family involvement in services. The Project also has produced a brief overview on the challenges of implementing and sustaining EBPs.*

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